

"DEAF AND DUMB"
STIGMA, STEREOTYPING AND STRATEGY MANAGEMENT OF THE
ADULT HEARING IMPAIRED AT WORK

(in two volumes)

by

Ruth Pinder

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The title was chosen since the phrase "Deaf and Dumb" is one of the commoner epithets used by hearing people when referring to the hearing impaired. "Dumb" is usually employed in a pejorative rather than a literal sense.

"I'd never declare I was deaf on an application form.
They'd think you couldn't speak as well"

(Miss C.G.)

"Being born deaf it's not different. When you become
deaf you pick up what deaf people feel anyway - behaviour,
habits, feelings ... It's much easier for someone with
acquired deafness to accept other deaf people"

(Mr. H. H.)

ABSTRACT

This study investigates the perceptions different groups of hearing impaired adults have of the difficulties experienced in the acquisition and retention of satisfactory employment. A societal reactions perspective is adopted: departures from 'standard' communicative competence which violate expected norms of interaction are heavily sanctioned in our society. Those who 'deviate' in this respect tend to be negatively categorised in a fairly uniform manner. Thus the mildly impaired suffer similar imputations of deviance as those more severely impaired, variations being of degree rather than of kind. Despite this common categorisation, however, the hearing impaired adopt differing strategies to deal with stigma according to their skill in achieving 'standard' communicative 'competencies'.

The semi-closed field of employment was chosen as illustrative of my arguments, as the hearing impaired must contend daily with a hearing environment. Participant observation activities were combined with in-depth interviewing of fifty respondents, covering a diverse range of clinical loss, age of onset and communication skills.

My major speculation was confirmed. Respondents, as a group, felt under-involved, if not totally segregated from participation in economic goals by the stereotyping and stigma reactions their handicap was perceived to elicit from work colleagues and employers. Outcomes, however, differed according to skill in communicative performance, although the work setting constrained options overall for successful strategy management. Other findings include the power of informal labellers to instigate deviant outcomes; the situational and sequential nature of deviance defining; the legitimisation of limitations extrinsic to a respondent's handicap as intrinsic, and their rationalisation as 'insuperable obstacles'; and adherence by respondents to the work ethic.

An appreciation of the commonalities of the deviantising process as applied to different groups of the hearing impaired is a pre-requisite for suggested anti-discriminatory legislation: to proscribe overt stigmatising behaviour, and ultimately eradicate stigma's 'small beginnings' at the level of individual interaction.

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TABLE OF CONTENTS

<u>CHAPTER 1</u>	<u>ORIENTATIONS</u>	1
<u>CHAPTER 2</u>	<u>DOING RESEARCH</u>	22
	1. <u>Access to shared meanings?</u>	24
	2. <u>Entering the research situation: Participant Observation</u>	26
	(a) Gallaudet College for the Deaf	27
	(b) Learning to Sign	28
	(c) The Breakthrough Club	32
	3. <u>Collecting my respondents</u>	34
	(a) The Comparisons Controversy	34
	(b) Access to sources	41
	4. <u>One side of the picture? The Subjective Response</u>	45
	5. <u>Interviewing the hearing impaired: breaking all the Rules</u>	49
	6. <u>Attempts at classification and measurement: Loosening the 'Objectivist' Grip</u>	56
<u>CHAPTER 3</u>	<u>LABELLING THE HEARING IMPAIRED</u>	71
	1. <u>Deviance and hearing impairment - The definitions of others: The Power to Defile</u>	73
	(a) Stigma	74
	i. Hearing Aids as stigma symbols	77
	ii. The Lipreader as 'faulty interactant'	78
	iii. 'Incompetent' speech	80
	iv. Sign Language	82
	(b) Stereotyping: 'Deaf, dumb and daft'	85
	2. <u>The Ability to Resist: Strategy Management</u>	90
	(a) Passing	92
	(b) Normalising	95
	i. Deviance Disavowal and Denial	95
	ii. Avoidance/Withdrawal	96
	iii. Neutralisation and rationalisation	97
	iv. A Note on Prior Disclosure	98
	(c) Avowal	99
	i. Capitalisation	99
	ii. Capitulation	100
	iii. Confrontation	100
	iv. The Deaf Community - collective confrontation	101
	(d) Politicization	103
	3. <u>Outcomes</u>	105

CHAPTER 3 contd.

- 4. The definitions of others at work: additional obstacles, penalties, exposure, and curtailed bargaining powers 108

CHAPTER 4 GAINING A FOOTHOLD: THE DIFFICULTIES OF OBTAINING A JOB 117

- 1. Facing the world of work with unwanted 'stickers' 119
- 2. 'Obstacles' to being hired 122
 - (a) "They don't understand. It's like having fits" 122
 - (b) A Preference for 'Normals' 124
 - (c) "You're a fire hazard" 125
 - (d) "Jobs with a phone - they're non-starters" 126
- 3. Official Labels: Help or Hindrance? 128
 - (a) A Diminished range of jobs: "There's no encouragement in the deaf world to expand" 128
 - (b) Keeping in Line: 'Help' from the Statutory Placement Services 134
 - i. The 'Stock response': "They're not geared to deaf people" 137
 - ii. Handling the System 139
- 4. Facing a Prospective Employer 143
 - (a) Prior Preparation - Application forms 144
 - (b) The Interview 145
 - i. To tell - or not to tell 147
 - ii. Excuses - and rejection 152
 - iii. To rely on a helping hand or manage alone? 154
- 5. Being Out of Work: Actuality and Fears 156
 - (a) Employment will always be bad for the deaf" 156
 - (b) "I don't care what I do so long as I'm employed" 160

CHAPTER 5 'STICKING IT OUT': THE PROBLEMS OF JOB RETENTION 165

- 1. Work colleagues as unofficial labellers - friend or foe? 168
- 2. Stickiness and Unease 171
 - (a) "I feel deformed wearing one" 172
 - (b) "When they hear my speech, they're speechless!" 174

CHAPTER 5 contd.

3.	<u>Impatience and Irritability</u>	179
	Strain - 'Managing a Front'	181
4.	<u>Managing Stigma at Work: Some Effective Tactics?</u>	183
	(a) Playing the buffoon	184
	(b) Avoiding the avoiders	185
	(c) Looking for protective cover	186
5.	<u>Some Stigma Outcomes: "It's natural, isn't it?"</u>	187
	(a) Being by-passed - gossip as a social ritual at work	188
	(b) Exclusion from lunches, coffee/tea breaks	190
	(c) Missing out on jokes	193
	(d) A self-confirming image? Loss of self-confidence, anxiety, isolation and depression	194
6.	<u>Harsher Reactions and Further Outcomes</u>	201
	(a) Teasing, 'taking the mickey' and ridicule	201
	(b) "No signing here, please!"	202
	(c) Trouble	205
	(d) The entry of employers - reinforcing the verdict	211
	(e) Being sent to Coventry	215

CHAPTER 6 MAKING THE MOST OF A BAD JOB 220

1.	<u>Sins of commission or omission?</u>	220
	(a) Missing out on things: "It's what you're <u>not</u> told that matters"	221
	(b) Asking for help: "It's too much trouble"	225
2.	<u>Instructions: A Form of Social Control</u>	229
	(a) Being told what to do	229
	i. Coping with verbal instructions	229
	ii. Writing and gesture - an invisible deprivation	233
	(b) Telling others what to do: "You're not <u>expected</u> to supervise"	237
3.	<u>"That's for Hearing People"</u>	239
	(a) The phone as 'insurmountable obstacle'	239
	i. Strain, depleted self-confidence and 'spread'	241

CHAPTER 6 contd.

	ii. Amplifiers - "We can't mess about with these"	242
	iii. A reduced quality of working life	246
	(b) Meetings: A Case of 'Doing Solitary'	248
	A 'No Go' Area	250
4.	<u>Exclusion from economic goals</u>	254
	(a) Expectations and aspirations versus 'reality': Underemployment	255
	i. "Better jobs go to hearing people"	255
	ii. Boredom and frustration	259
	(b) A Step up the Ladder: The unassailable peak?	261
	i. Denial, avoiding the issue and 'paralysis'	263
	ii. "You never get promotion because you're deaf"	266
	(c) The Significance of work for the hearing impaired: making the most of a bad job	271
	i. Pipe-dreams	273
	ii. "You're lucky to have a job at all"	274
	iii. Being trapped - and nagging uncertainty	274
	iv. Insecurity	275
	v. Indifference - except to a pay packet	278
	vi. Itchy feet	279

CHAPTER 7 CONCLUSIONS 282

1.	<u>Major findings</u>	284
2.	<u>Findings - a discussion: Towards a new understanding</u>	286
3.	<u>A Glimpse into the Future: Some Implications for Further Research</u>	306
4.	<u>Some Recommendations</u>	311

APPENDICES 318

1.	<u>A Review of the Literature</u>	318
	(1) Sociology - A Neglected Discipline	318
	(2) An Historical Overview	325
	(3) Noise-Induced Deafness	327
	(4) A Depressed Economic Picture	329

APPENDICES contd.

(5)	Unemployment	330
(6)	Underemployment	336
	(a) Insufficient training and re-training opportunities	338
	(b) Reduced skill levels	339
	(c) Job Satisfaction/Dissatisfaction	340
	(d) The Range of Jobs - and the Role of Professionals	343
	(e) Low occupational mobility	347
	(f) Promotion prospects	349
(7)	The Business of Actually Finding a Job	352
(8)	Communication	356
(9)	Attitudes of employers	365
(10)	Predictions for the Future	368
2.	<u>Summaries of information about respondents</u>	377
	i. Self-assessed hearing impairment (Table 2a)	377
	ii. Mode of Communication analysis (Table 2b)	381
	iii. Job Analysis (Table 2c)	382
3.	<u>Criteria for selection of respondents</u>	386
4.	<u>Sources of respondents</u>	389
5.	<u>Specimen letters to respondents</u>	391
6.	<u>First Interview Schedule</u>	393
7.	<u>Modified Interview Schedule</u>	400
8.	<u>Attempts at Classification</u>	407
	i. The Gallaudet Hearing Scale	407
	ii. "Questions about your hearing loss"	408
	iii. Pure-tone Air Conduction Testing	411
	Table 8a	424
	Table 8b	425
	Table 8c - Competence Groups I-V with data sheets & graphs	426
9.	<u>"Ease of Communication with .." Scale</u>	446
	i. Rationale for	447
	ii. Consistency of usage checks	453
	Table 9a	453
	Table 9b	455
	Graph	459
10.	<u>"The Deaf Manifesto"</u>	460
11.	Bibliography	461

CHAPTER 1: ORIENTATIONS

Deafness or hearing impairment^{1, 2}, has been described by Samuel Johnson as "the most desperate of human calamities" (in SUTCLIFFE, 1970). Many hearing impaired people themselves have attested to the devastating impact which it has, above all, on interpersonal relationships. Whilst motor impairments tend to isolate their victims from things, deafness or hearing impairment isolates one from people. If social contact provides that crucial sense of belonging to the world, its deprivation has profound social and other consequences.

I intend to treat this thesis subject matter essentially as a problem of communication, not in the usual way it is described in the literature as a clinical loss of expressive and receptive capacity; but as a problem of defective - and deviantised - communicative competence, which above all disrupts the assumptions people have about speech performance and interaction.

The subject actually poses something of a paradox: namely that the ability to handle social interrelationships with the smoothness which our society expects and requires is a function of such communicative competence. But it is precisely these skills which the hearing impaired, in varying degrees, lack. It is a lack which is subject to strong cultural sanctions.

Thus it is competence in speech performance with which I am principally concerned (and only to a lesser extent with/written language). In one sense it might be thought that I am taking an 'oralist' stance³. This would be to misconstrue my position. I am concerned to penetrate the interface between deaf and hearing in a hearing-dominated setting, that of employment. It is the perceptions of the hearing impaired as they confront this and attempt to devise strategies to ameliorate their position vis-à-vis the assumptions the hearing world has about competent speech performance in which I am interested. We live in a society which places a high premium on 'effective' speech skills. It is the hearing person's framework of reference for social understanding. And at work, the possession of 'standard'

speech skills generally enhances the capacity of its users to 'get on'.

Obviously language is the prior consideration, minimal language skills being reflected in correspondingly restricted or non-existent speech performance, witness the studies of the so-called wolf children (ITARD, and others). But few people speak with total grammatical accuracy. Indeed, the use of language in informal settings tends to be littered with grammatical errors, so that one can 'get away' with a considerable amount of linguistic inaccuracy. What are difficult to discount are distortions in speech delivery - discordancies of intonation, lack of rhythm, discrepancies in pitch, lack of 'affect' and, above all, lack of speech production at all. Additionally, of course, effective speech performance also depends on congruence between stimulus and response, question and answer, so my notion of communicative competence also embraces the skill of lipreading and the use of amplification where appropriate.

It has been amply demonstrated that most impairments negatively affect interpersonal encounters, and that stereotyping and stigmatising are common responses to conditions which are, in some way, 'unwholesomely' different. Impairments, of course, vary in the amount of deviantising they elicit - generally according to their visibility, their permanence, and the extent of responsibility attributed to the victim for his lot.

In general terms, however, impairments which feature defects of the face and voice have been found to elicit a profound threat to the normalcy of interaction - more so than other impairments located in other parts of the body. The hearing impaired breach expected norms of social competence, both in their speech and language performance, and by breaching culturally expected degrees of eye contact and physical space between interactants in the struggle to lipread.

This being so a point frequently overlooked is, I suggest, the misguided emphasis on the supposed 'invisibility' of hearing impairment. To

an extent this is so. Firstly, for those whose expressive communication skills are fairly intact, and who are able to rely on amplification and lip-reading to 'pass' in most situations, a well-concealed hearing aid will give the other participant no indication at all of the existence of a handicap. Secondly, there is no prior preparation available to prospective interactants analagous, for example, to the sight of an approaching wheelchair-bound person.

However, sign language, used most by the profoundly prelingually deaf,^{4a} is highly visible and public. And, crucially depending on the degree of communicative deficiency, impairment in speech performance becomes immediately evident if not obtrusive on encounter. As Goffman has argued so cogently, as soon as conversation is initiated, our folk notions that speech will normally be without a hitch are broken; and the mechanics of conversation are such that the other actor's attention cannot but be directed, and re-directed, towards the offending orifice.

My aim has been to try and understand sociologically some of the processes underlying the treatment of the hearing impaired in the particular situation of work, in terms of the deviantising of those whose communication performance departs from expected norms. In particular, I have endeavoured to understand how hearing impaired respondents themselves try to make sense of the social and economic under-involvement, if not outright segregation, to which I contend they feel subject.

To this end I have adopted an interactionist or, more particularly, a societal reaction approach as the most effective explanatory tool for such an analysis. I have found it useful to confine myself to a series of sensitising concepts: namely those of stigma, stereotyping, strategy management and deviant outcomes as working tools. This, however, in no way commits me to viewing labelling theory as an exclusive panacea for explanation. It merely illustrates one particular facet of a complex process, but one which has been crucially neglected. Its ultimate justification

lies in its being grounded in the data I have obtained.

With this background in mind, I have extended the interactionist perspective into the field of employment. This venture into the world of work was stimulated by what I perceived as a gap in interactionist studies. Whilst research has been undertaken of interaction in casual social situations (GOFFMAN, 1957; 1963; 1968), and, at the other end of the extreme, in total institutions (GOFFMAN, 1961; COHEN and TAYLOR, 1980), little attention seems to have been paid to interaction in situations located between these two polarities. The implications of disrupted communication in and around employment represented for me a situation possessing some of the characteristics of both extremes.

If, as I contend, those deficient in taken-for-granted communicative competence are socially stigmatised and segregated, the question arises as to how far this social 'smearing' penetrates the work situation, and, if so, how, and with what ramifications in terms of exclusion from participation in social and work-related activities; and ultimately in denial of access to the economic goals of success which are considered to symbolise desired status in our culture.

The specific situation of employment thus seemed illustrative of my arguments for several reasons. It is almost a truism that it is mainly via work that people tend to integrate into the world at large. And in Western culture both the ability to work and the nature of the work itself tend to determine the social standing and worth of a person ⁵.

Moreover, it is the social relationships at work which are now expected to give the majority of working people that sense of fulfillment which previously tended to be derived from membership of an extended kinship system and a home community. Even for the élite of the labour force, who are able to derive satisfaction from the intrinsic interest of the work itself, social relationships are still important.

For the hearing impaired, employment represents one of the most important situations where they must not only contend daily with a hearing environment, but sustain working within it. One can not get up and walk out of troublesome or ruptured relationships with one's work peers or supervisors in the way one can extricate oneself from uncomfortable social situations. It is the constant evaluation - and perceived devaluation - by hearing work peers and employers which is at the centre of this issue.

Again, employment is an area where the vast majority of people - hearing as well as hearing impaired - are under the control of others. Opportunities for negotiating favourable definitions of self are not generally sustainable on one's own terms. Within this general limited framework, however, I anticipated some areas which would be more amenable to the negotiation of favourable outcomes than others, where, perhaps, options would appear to be totally closed. What does this signify for a group already stigmatised?

Additionally, work is an area where the actual number of jobs with a large communicative content is increasing, and where stylistically formal speech is often at a premium. Verbal smoothness, dexterity, style and polish are often the chief determinants in obtaining upward occupational mobility - a highly prized and expected goal in our culture.

My intention to study the adult hearing impaired at work may well represent the last opportunity to investigate directly the 'realities' of their employment experience, in an era where training for one job was presumed to serve one through to retirement. Also, I may well have interviewed the last generation of hearing impaired employees to be engaged in trades traditionally entered by deaf employees: printing, bakery, assembly-line work, clerical work. As such, I contend, it is of considerable sociological importance. Given the traditional reluctance of the deaf to change (discussed in Appendix 1), future researchers of the hearing impaired may

well be obliged to concentrate on a study of unemployment.

Principally, however, employment represents a key area where the commonality of negative evaluations perceived to be made of the hearing impaired can, I suggest, most vividly be demonstrated. Defective communicative performance is often cruelly public. The outcomes are both tangible and intangible.

The problematic nature of the hearing impaired at work will, I hope, be made abundantly clear in the empirical analysis. It is my fundamental contention that those deficient in the taken-for-granted skills of speech performance are stereotyped and stigmatised socially and economically as much in the work situation as in any casual social encounter. Additionally, they are under-involved, if not actually excluded, from social and work-related activities, lacking that critical acceptance from peers and colleagues which is vital to a sense of belonging and self-worth in society. Above all, they are denied legitimate access to the economic goals which are supposedly available to all in our culture.

Nevertheless, options for strategy management, although more limited, represent an on-going struggle to maintain favourable definitions of self in the face of a fairly uniform tendency to categorise all hearing impaired at the lowest common denominator of ability, regardless of individual differences.

Having located the target area, one particular issue ultimately became the central focus of this research: the insistent emphasis, principally from professional workers for the deaf, not only on the uniqueness of hearing impairment, but on the uniqueness of different groups within the hearing impaired population. What began initially simply as 'an interesting question', ie. the speculation that those individuals with relatively minor hearing handicap undergo much the same social process as those with major handicaps, rapidly became a source of bitter contention

and, ultimately, pivotal to this thesis.

I had speculated that the same kinds of imputations, of stupidity, witlessness, mental retardation, which were perceived to be made of the prelingually deaf with poor speech, might well be made of those with acquired deafness, albeit in somewhat attenuated form. In other words, the differences might turn out to be one of degree only, rather than of kind. It seemed to my jejune eyes that a person adventitiously deafened^{4b} at age 40, literate, but unable to lipread and thus talk with, is as much a social cripple as her prelingually deaf counterpart with minimal speech and language skills. And, conversely, that some prelingually deaf people do manage to acquire passable speech and language to enable 'normal' interaction to take place.

Thus I felt the traditional dichotomy between pre- and postlingually deafened was somewhat spurious when looked at in its social context of the kinds of judgements society tends to make of those with deviant communication skills. Hearing people are rarely interested in the age of onset of impairment, merely the effects. Furthermore, I had anticipated that differences would appear in relation to the way stigma was handled, and that such strategy management would correlate positively with the acquisition or preservation of 'acceptable' communication skills and, to a lesser extent, salience of resources.

However, I found myself faced with a barrage of criticism that no valid comparisons could possibly be made between the various groups of the hearing impaired, their problems apparently being so mutually exclusive and unique. I shall look in more detail in Chapter 2 why it appeared that so many of the professionals I contacted in the field argued so tenaciously that to try and compare the prelingually with the postlingually deaf was to commit the folly, if not heresy, of searching for similarities where none existed. I was frequently assured that no study attempting such an exercise could

carry any credibility at all.

Suffice to say that it was the emphasis on the uniqueness of hearing impairment - or rather what turned out to be the uniqueness of one particular group in this world, that of the signing deaf and their distinctive culture - which ultimately provided me with the clue. Aetiologically, of course, every impairment is unique. Moreover, I fully appreciate the need many impaired people feel to locate themselves psychologically, spatially and emotionally in categories. To be able to define where one is, with the appropriate label, is an enabling device which may help in coping with the handicap. Additionally, to be able to assert one's differences is possibly a necessary pre-requisite to asserting one's similarities.

I was to discover that it is far from unusual. Searching for wider applicability to my findings, I approached a number of other organisations catering specifically for those suffering from disorders of communication. The reply from AFASIC* (1981) illustrates the point. Their letter stated:

"This handicap is in no way comparable to the problems of not understanding the meaning of words".**

I had surmised that an organisation dealing with all speech impaired children would share points of commonality with the speech impaired deaf. I have not singled out this particular organisation in any spirit of malice. It is simply indicative of the fragmented, individualised world of the impaired, which so effectively precludes an appreciation of its socially constructed nature.

However, taking the perspective I have, I contend that impairments share common features which unite differing conditions to a much greater extent than they divide. Impaired people above all share with other minority groups minority status. They tend to be relegated to the margins of society. Each person with an impairment faces a common set of obstacles in the form of dealing with cultural stereotypes and stigma (not to mention

* Association For All Speech Impaired Children

** An article written later by the Chairperson of the Association acknowledged such an alternative perspective (BROWNING, 1981). Apparently deafness is one of the commoner mis-diagnoses applied to aphasic children.

more tangible obstacles). He is obliged to negotiate the most acceptable role his definers will allow in the face of these. He is permanently engaged in a series of 'stigma contests'.

I suggest that hearing impairment, in common with other disorders of speech and language is unique only in the sense that problems of communication with others are the handicap. The fact that a distinctive culture based on the use of an equally distinctive visual language exists within the hearing impaired world in no way vitiates the validity of such a perspective.

I hope that an illumination of these questions will provide a fruitful new perspective on how the hearing impaired perceive their world. To persevere in the face of strong criticism is the lot of every sociologist who wishes to uncover layers of meaning that everyone is assumed to know. This intense opposition provided me with an uncomfortable, if not traumatic, introduction to a world reluctant to question its taken-for-granted stock of common-sense knowledge.

Without wishing to give the impression that all was gloom and despondency, I was initially troubled by two other criticisms. Again they will have a ring of familiarity. It was the surmounting of them which finally gave me the impetus to persevere with a subject which could have been dealt with so much more easily - by means of an historical analysis, for instance, or by complying with the advice to concentrate on one group only. I claim no virtue for this. In return for the trials and tribulations, I gained the richness which comes from beginning to understand a world of meaning of which I had previously little or no knowledge. It is a richness that transforms one's own personal autobiography.

One criticism was the assertion that I should either have been hearing impaired myself, or should have worked in the field prior to embarking on the study. The criticisms took two forms: (a) how can you possibly

understand? And (b) how can you possibly have anything to contribute when others with years of experience know the area far better than you do? In crude terms, how can you, and secondly, how dare you?

Nevertheless, the criticisms merit attention. To have been born 'native' deaf⁶ and an accepted member of the deaf community would, indeed, have been a unique passport into that very particular world of the signing deaf culture. And a mastery of sign language before embarking on the project would, of course, have been ideal. Actual research practice rarely accords with ideal notions of how, optimally, it should have been done.

Possibly to have been a 'native' deaf signer would have accorded me less easy access to the world of those with acquired deafness who numerically form by far the greater part of the hearing impaired population⁷. And it is doubtful whether a fluency in sign would have facilitated my contact with that group of the hearing impaired whom I consider to be the most disadvantaged and neglected of all: the profoundly prelingually orally deaf, functionally illiterate, and with no vehicle of communication other than natural gesture and home-made sign.

My motivation, however, has not been totally disinterested. I embarked on the study for personal reasons in an attempt to make some kind of wider social sense of my husband's impairment, multiple sclerosis. I contend that it is precisely because reactions to all impairments have so much in common - my husband's unsteady gait and periodic loss of balance giving rise to perceived allegations of being drunk, or worse, out of control - which provides grist to my argument. Although the metaphor is different, the wide application of the soubriquet 'deaf and dumb' to the hearing impaired indicates much scope for commonality.

I suggest that this position gives me both the advantages of additional insight, as well as adequate distance from the particular condition of hearing loss itself not to cloud my judgement. I could not have

done research into m.s. Thus 'I can': living with a husband who is impaired gives me the kind of "intimate familiarity" (LOFLAND, 1976) which no hearing professional working for the deaf, however devoted, can acquire.

Additionally I sought to meet the criticism through extensive use of participant observation. Throughout the first two years of the project I spent a great deal of time sensitising myself to the issues which make hearing impairment problematic. They were for me some of the most exciting aspects of the whole research exercise. I will describe them in detail in Chapter 2.

As for the second criticism, 'I dare' because it is precisely the contribution of sociology (so absent from this field as I will note shortly) to question the apparently obvious assumptions upon which those working for so many years in the field rely. My contribution to the grand scheme of things may be small, but I have raised questions and suggested an alternative way of looking for those willing to re-appraise their assumptions of the taken-for-granted and absolute 'rightness' of their view of the world - without in any way wishing to demolish the older perspective. It is simply an added dimension to the understandings which already exist. Reality, as BERGER (1963) has noted, has many layers of meaning. If I have succeeded in peeling off one layer, encouraging people at least to pause, then a sociological investigation of the hearing impaired at work will have been well worth the while.

The actual choice of hearing impairment on which to focus as opposed to, say, cerebral palsy, was almost entirely fortuitous. My MA dissertation which was concerned with the perception of a range of impaired respondents of the process of registration with the DRO just happened to include a profoundly prelingually orally deaf subject in the sample. The shock was almost irrational. With vocal chords unimpaired, he was unable to communicate a single word with me. The strength of the feeling associated with an inability to communicate remains

with me and has given impetus to this thesis, although the lack of speech no longer shocks or disconcerts.

With this background in mind, fifty respondents covering the whole range of hearing impairment and communication modes were interviewed in depth in an attempt to approximate as closely as possible the meanings and 'realities' which subjects attached to working in a hearing-dominated work environment; and to investigate the methods and 'accounting procedures' they developed in making sense of their situation.

I made a very deliberate and conscious decision to concentrate on their perceptions only (the methodological problems of which will be dealt with in Chapter 2), rather than verifying their accounts by the use of a control sample. Apart from approaching the man in the street, the only meaningful hearing control sample would have been the employers and co-workers of my respondents. As some of my subjects were engaged in concealing or at least normalising their impairment, to have undertaken such an exercise would have been ethically unfeasible.

In any event my interest lies not in verification at this stage. The aim is to focus on how the hearing impaired perceive and manage their world. Accounts of how the hearing population regard them are legion, and have played a significant role in dictating how the hearing impaired should or should not be educated, what jobs they should/should not do; and whether they should/should not be 'integrated' into mainstream society. The hearing person has traditionally "fronted" for the deaf (NASH and NASH, 1981). What the hearing impaired have to say of their experiences of reality, and how they structure their responses to cope with constant denigration of their status have not had much of a hearing.

The very nature of their impairment, of course, precludes much articulation of their plight. They are obliged to rely on others to do it for them - hearing others. Thus the reference point has always been

located around hearing norms, largely ignoring the symbolic universe inhabited by the hearing impaired themselves.

Hence the preservation of the integrity of the data has been a source of concern to me. However, merely to allow the "itches and pangs" to stand by themselves may suffice as a journalistic exercise but not as a piece of academic research. Inevitably I have imposed an analytical framework upon the data which, if shown to the respondents I talked with, might conceivably make little sense to them. It is something which, as BECKER (1974) noted, we ought to be more concerned about.

What I have tried to do is to juxtapose the data and framework in such a way that the data does not become submerged. I have also kept intact many of the idiosyncracies of speech and syntax, not in order to strive after piquancy of effect, but to state 'this is how it was said/signed to me'. Some discrepancies in the sophistication of response of signing respondents will be apparent. They reflect my slowly growing competence, rather than being indicative of 'illiterate signing'. Where recourse was additionally made to writing, I have preserved and reproduced directly what was written.

Finally, a word about the paucity of sociological literature on hearing impairment generally which justified, in retrospect, my working in this area. Interestingly enough it is paralleled by an equivalent dearth of sociological interest in other communication disorders, such as aphasia, severe stuttering, cleft palate speech and male lispings. Considering the stress sociologists have traditionally placed on speech and language as essential to the socialisation process, the omission is puzzling. For the hearing impaired, it is an omission which has only been repaired, largely for the signing deaf, in the last two to three years.

Other impairments have fared considerably better in attracting the attention of sociologists, particularly sociologists of deviance: the blind (SCOTT, 1969); the mentally retarded (EDGERTON, 1967; MERCER, 1973);

epileptics (WEST, 1979; OLIVER, 1979), not to mention the numerous sociological analyses of the 'mentally ill' (GOFFMAN, 1961; SCHEFF, 1963; SZASZ, 1970). Yet disorders of communication are the very stuff of sociology. They are handicaps which vitally affect almost every aspect of the interaction between man and the society he inhabits. I shall look at the few exceptions to this picture in Appendix 1.

Part of the explanation, I suggest, lies in the dominance of the medical, para-medical and teaching professions, each wedded to an individual pathological model of hearing impairment which conveniently obscures and mystifies its wider social implications. Above all, professionalism takes the hearing world as its referent. And the existence of a captive audience in the form of segregated schools for the deaf has ensured that concentration has focussed on this sector of the population to the exclusion of all else. I suggest that psychologists have played no small part in legitimating the 'deaf and dumb' syndrome by the administration of a battery of verbally loaded IQ tests to profoundly deaf children.

Sociologists themselves are by no means immune from criticism. Difficulties in communication in addition to those normally experienced in any research project have also contributed, I suggest, to the lack of the kind of qualitative data often favoured by sociologists - contrary to the relative ease which administration of standard tests and measurement techniques permit. If psychologists are guilty of an excess of fervour, we are equally guilty of sloth.

Moreover, little of an analytical nature has been written about the social processes which make employment problematic for the hearing impaired. The literature has been largely instrumental (reviewed in Appendix 1) and confined to the prelingually deaf. Using a host of varying definitions and methods, comparisons are virtually impossible. But to the best of my knowledge, there has been no attempt to understand sociologically why the

hearing impaired appear to be denied access to normal employment prospects. And the reluctance to look - even instrumentally - at the wider implications which a study of hearing impairment might have for other communication disorders I have found worrying.

Above all else, this thesis represents a plea for unity: not just among the hearing impaired, but with all impaired people. If by focussing on a societal framework of analysis, the depoliticizing and parochial nature of the traditional focus on an individualistic model of impairment can be clarified, a mutual appreciation of the commonality of the problems of all impaired people might emerge and the impetus for change stimulated.

For the hearing impaired, if I am able to show that the processes stereotyping and consequent stigmatising tend to apply fairly uniformly across the whole spectrum of the hearing impaired population, which I contend they do, it is my hope that the age-old barriers between the vying groups might, at best, mellow. If, for example, the use of sign language fails to protect the otherwise communicatively 'incompetent' from trouble at work in much the same way as the orally deaf with minimal speech competence, can a toleration of the hearing orientation of the latter not be extended by the former?

Without a basic appreciation of the commonality of their devalued status, the impaired are currently represented by hundreds of organizations, each wedded to the interests of that particular group, and often supported by a powerful phalanx of professional vested interests determined to preserve the status quo. Such a situation is counter-productive for ameliorating the situation of impaired people. Discrimination will continue whilst the focus is on impairment as a matter of individual pathology, rather than endeavouring to understand the wider social context in which such discrimination operates.

Having outlined my basic argument, located the 'problem area', raised

some substantive issues, indicated something of the problematic nature of hearing impairment and its lack of treatment by sociologists, described some of my own difficulties and motivations, the basic framework of the thesis is as follows:

Chapter 2 is a sequel to this introductory section. It examines in greater depth some of the issues I have raised already, such as the comparisons controversy. Further, it looks at the problems of obtaining that "privileged access to shared meanings" (PLATT, 1982), and how this was tackled in terms of participant observation and in-depth interviews. My various attempts at learning sign are discussed, together with what I consider to be one of the most important ancillary issues raised by this research: the difficulties experienced in interviewing different groups of the hearing impaired. The process of data gathering, and my attempts at quantification will be examined.

Chapter 3 outlines the theoretical perspective I have adopted, although a comprehensive discussion of the basic tenets of a labelling approach has been considered otiose. I have concentrated on a few working concepts derived from this perspective, which arose out of and are firmly grounded in, the data gathering process, and which seemed to provide the most fruitful tools for analysis. I have indicated how, traditionally located in the sphere of casual social encounters, this perspective may be fruitfully extended into the area of employment. The general relationship between deviance and hearing impairment is my provisional starting point.

I have endeavoured to illustrate my perspective directly by relating it to the stigma attached, for example, to the wearing of hearing aids, to bizarre or 'incompetent' speech, and to sign language. The differential strategy management of hearing impaired people in response to this is then discussed.

Chapters 4, 5 and 6 are devoted to an in-depth analysis of my empirical data and form the core of the thesis. I have structured them in terms of the various phases involved in the work obtaining and retaining process. I have then analysed the perceived difficulties encountered in terms of a continuum of stigma reactions, ranging from moral and socio-psychological exclusion to economic exclusion.

Thus, the first chapter is concerned with the actual processes of obtaining a job and contending with the stigma reactions which are a result of both official and less formal labelling, particularly on the part of statutory placement officers and prospective employers. The culmination of perceived restricted job access and reduced expectations and opportunities is the interview, which I regard as a classic stigma contest between definer and defined. The deviant outcome of both actual and feared unemployment is discussed. Respondents' perceptions of the helping placement services are examined, together with their attempts to make sense of job rejections. The restricted opportunities for manoeuvrability in the face of official outside labelling are noted.

The heart of the empirical work is contained in the following chapter where informal, interpersonal social relationships with work colleagues are investigated. It is what happens at this primary level of interaction, I suggest, which sets the scene for future employment prospects. Analysis is in terms of a continuum of stigma reactions at the moral, socio-psychological end of the stigma spectrum; and outcomes, ranging from exclusion from participation in the gossip network, to the instigation of trouble are discussed. Options for strategy management are investigated, together with a review of what I refer to as 'secondary deviant outcomes', ie. the extent to which continuous exposure to devaluative judgements tends to be internalised and self-confirming. The power of hearing work colleagues to shame and humiliate, and to act

as 'moral entrepreneurs' in the creation of further deviant outcomes is viewed as a particularly pernicious form of social control.

The final empirical chapter focusses more particularly on the end point of the stigma reaction continuum - that of economic exclusion. Firstly, exclusion from participation in specific work-related tasks are looked at and then related to the much broader exclusion from participation in the 'success motif'. Its roots in the interaction process are deemed to be crucial to an understanding of deviant outcomes at the level of denial of promotion prospects, underemployment, and the meanings the hearing impaired attribute to the concept of job fulfillment generally. The restricted opportunities for redefining one's status are contrasted with the more fluid nature of the bargaining process in a less enclosed situation.

The concluding chapter will examine the implications of my findings in the light of the applicability of the concepts I chose to adopt. Does a labelling perspective provide the best explanatory model for what is seen as an orchestrated campaign to undermine the self-image of the hearing impaired at work? Finally, implications for future research will be briefly touched on, and the wider applicability of a study of this nature discussed. Recommendations will be less concerned with pragmatic policy action - although some indications will be given of the way social policy change could conceivably alleviate the depressed economic situation of many respondents. I am, however, more concerned with presenting an alternative way of looking. The emphasis is on creating a climate of understanding out of the similarities of experience of stigma and stereotyping, from which co-operation conducive to a much broader political solution might emerge.

NOTES

1. I have used the classification adopted by the World Health Organisation (quoted in C.O.R.A.D, 1982):

"An impairment is defined as any loss or abnormality of psychological, physiological or anatomical structural function; disability is any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal; and handicap is the disadvantage resulting from an impairment or disability that prevents the fulfillment of a role that is normal ..".

It seems important that some attempt at consistency of usage should be adopted. So whilst the works of HARRIS et al., (1971); SAINSBURY (1973); BLAXTER (1975 and 1976); and FINKELSTEIN (1980) have been noted, I have opted for the typology which has international currency. In any event, the common use of the term 'hearing impairment' constrained me.

2. I have referred to the global area of what used to be called 'deafness' as 'hearing impairment'. This is a clumsy euphemism now in common usage, and one that does little to mitigate the social reaction to the condition. Any reference to 'deafness' in the text is largely confined to the profoundly prelingually deaf without speech (manual and oral). The nomenclature implies no denial of the symbolic 'reality' of deafness. At the time of writing, however, the term 'hearing impaired' has been adopted to describe the 'hard of hearing' and those postlingually deafened; whilst the term 'deaf' or 'Deaf' has been reserved for the signing impaired (BRIEN, 1983).

3. The oralist-manualist schism originated in the 16th century. Prior to this 'deaf-mutes' were considered quite ineducable. The pressures towards educating the deaf were economic and legal. Under Justinian law, the congenitally 'deaf and dumb' were denied all legal rights, crucially the right of inheritance (as opposed to those who were deaf but able to speak). For the first-born of the aristocracy, deaf-mutism posed severe problems and often led to the loss of an entire estate. It was the efforts of a Benedictine monk, Padre Ponce de Leon who taught 'deaf-mutes' of the Spanish aristocracy to read and speak, thus initiating the teaching of articulation.

However, his work was confined to members of the aristocracy. It was only in the late 17th and early 18th centuries that teaching of the deaf became of more general concern. Whilst Samuel Heinicke in Leipzig developed and extended the principles of speech teaching, the Abbe de l'Epee in Paris was creating his own "methodical signs" to produce a visual language "ordered according to French grammar" (BRIEN, 1981) His successor, Sicard, is more properly credited with the foundation of sign language.

These two disparate means of teaching polarised the deaf world into two bitterly opposing camps, oralist and manualist, a schism which persists today with all the fanaticism of religious warfare. The oralist philosophy as espoused today by its most sophisticated contemporaries, Father van Uden in Holland, and Daniel Ling in the U.S., stresses the teaching of language and speech principally via lipreading and imitation of vocal movements through touch. Manual teaching, suppressed for many years in the UK, is less a philosophy than a method borne of the failure of the oralists to 'deliver the goods'. Manualists use one or other variant of sign, supplemented by finger-spelling and speech where appropriate.

4. A bewildering array of definitions has plagued the field of hearing impairment with concomitant effects on the measurement and

estimate of prevalence - and the provision of appropriate services (WILKINS 1949; HINCHCLIFFE, 1961; D'SOUZA et al., 1975; HAGGARD et al., 1981) These have varied from 'congenital' to 'acquired' deafness; 'pre' to 'postlingual' deafness; 'functional' versus 'non-functional' hearing "for the ordinary purposes of life" (Conference of Executives of American Schools for the Deaf, 1938); 'deaf', 'partially deaf', 'hard of hearing'; to the definitions in current use by the DHSS and Department of Employment, 'Deaf Without speech', 'Deaf with Speech' and 'hard of hearing'. (No guidance is given as to what these terms are supposed to embrace).

I have finally reached the point, alongside more illustrious figures in the field (SCHEIN and DELK, 1974) where the shortcomings of terminology "...make it virtually impossible to find, or invent terms which will accurately distinguish between the several categories of deafness" (SCHOWE, 1979). The determination of a single point beyond which one is described as 'deaf' is quite arbitrary. However, as the terms appear regularly in the literature, and are used by professionals in the field, the following general classification has been adhered to in the thesis.

4a. Prelingual Deafness - confusingly describes those who are either born deaf or acquire deafness before the age at which language acquisition is supposed to begin. I maintain this is far from satisfactory. Auditory perception is one of the first experiences of a new-born baby. According to FISCH (1983) "The infant starts to learn many aspects of language from the very beginning and long before 6 months of age". Yet Audiology Clinics still classify their 'prelinguals' to include quite wide variations in actual hearing loss, and subjects up to the age of 2.

Even DENMARK's (1978) much respected definition does not resolve the confusion arising from ignorance of precisely when language acquisition commences. He suggests confining prelingual deafness to "...hearing impairment which is profound, which cannot be alleviated to any useful degree by hearing aids and which is either congenital or acquired early in life before the development of speech and language" (my italics.)

It seems that any notion of prelingual deafness carries little credibility as a definitional entity. The distinction is rather that between acquired and profound congenital deafness. However, the problems of early diagnosis make even this latter a very fallible construct. My own disquiet echoes that of HAGGARD (1982). He argues: "Because there is a continuum of possible times at which a sudden deafness could occur, there is no categorical definition of prelingually deaf ..". He suggests a working definition thus: "...a child of 5 or over whose speech and language are grossly deficient and who is severely or profoundly hearing impaired such that the impairment may reasonably be inferred to be the cause and who has not previously shown near normal linguistic competence".

4b. Acquired Deafness - This is taken to describe those who contract a hearing loss (which may be profound) after language has been ordinarily acquired. A condition characterised by a gradual and progressive loss is thus distinguished from Adventitious Deafness which generally refers to the sudden, traumatic onset of deafness, which may be partial or total. Its victims are usually referred to as the 'adventitiously deafened' (McCALL, 1967; 1978).

5. My thesis has been predicated both on the desirability and necessity of work. The work ethic was strongly adhered to by the respondents I talked with. Nevertheless, there is some merit in the argument that it is illogical to coerce the severely impaired to maintain a productive role in a society which, despite protestations to the contrary, is affluent enough to afford them a reasonable standard of living outside the workforce, when unemployment amongst the able-bodied is high and likely to increase.

It successfully detracts from the more important task of finding alternative legitimate roles for the impaired which fulfil the equivalent functions of work (CARROLL, 1965). And it is nonsense to spend large amounts on the special education of the profoundly impaired only to neglect their subsequent careers. However, given the resistance to positive thinking in this direction, 'Significant Living Without Work' is a hollow concept.

6. The term 'native deaf' refers to one who is born deaf of deaf parents and whose first language is sign. Most deaf children are born of hearing parents - hence the persistence of the oralist/manualist controversy.

7. HAGGARD (op.cit) estimates that 1 per 1,000 children are profoundly prelingually deaf. SCHIFF and THAYER (cited in WEINBERGER and RADELET, 1982) suggest that those with prelingual losses represent only 2% of the hearing impaired population.

Other background information useful to an understanding of the subject is presented here for the interested reader.

Confusion abounds regarding the blanket term 'deaf' and the equally vague term 'hard of hearing'. MOORES' (1978) distinction is a useful one: he defines a deaf person as "... one whose hearing is disabled to an extent ... that precludes the understanding of speech through the ear alone, without or with the use of a hearing aid". A hard of hearing person is one "... whose hearing is disabled to an extent .. that makes difficult, but does not preclude, the understanding of speech through the ear alone, without or with a hearing aid".

The distinction between conductive (or middle ear) deafness and sensori-neural (or inner ear) deafness is important. (I shall omit the numerically tiny population of those suffering from central loss, or "disorders which occur beyond the auditory nerve, ie. between the brainstem and cerebral cortex" (THOMAS, 1980). Mixed conductive and sensori-neural deafness, however, is more common.

(a) Conductive deafness "... is caused by any affection of the conducting apparatus - the external auditory canal, the middle ear cleft, or the labyrinthine windows" (BALLANTYNE, 1977). Amplification can usually remedy much of the loss, and surgical intervention is now available for the two main conditions: otosclerosis and otitis media.

(b) Sensori-neural deafness, from which the greater portion of the hearing impaired population suffer, "... is caused by any affected part of the perceiving apparatus - the cochlear (sensory) or the auditory nerve (neural)" (BALLANTYNE, op.cit). It is this category which critically affects speech discrimination and has obvious implications for the restricted effectiveness of hearing aids. To date, the condition is inoperable.

Definitional ambiguities have affected the assessment of the incidence of hearing impairment from the time of WILKINS (op.cit) onwards. A figure of c. 3 million has been agreed on for the past decade or so, with a fair degree of unanimity regarding the distribution of those suffering the above different types of deafness. HAGGARD et al. (op.cit), however, using audiometric criteria of 25dB HL in the better ear over a frequency range of 0.5 to 4 kHz, have suggested an overall national prevalence of just under 20% of the population with clinically significant hearing loss.

N.B. Throughout this thesis I have used double quotation marks for direct citation, and single quotation marks for all other cases and inner quotation.

CHAPTER 2. DOING RESEARCH

Reflecting on his experience in Sparkbrook from the vantage point of 12 years' hindsight, MOORE (1977) commented:

".. full-time research is not a job; it is a way of life, and so one's life becomes woven into the research just as much as the research becomes part of one's life".

Whilst I cannot claim to have been immersed physically to the same extent, nevertheless for three years I have lived, breathed, eaten and often slept hearing impairment. Research does indeed have "all the intensity of a love affair" (PAYNE et al., 1981)

Even without the benefit of hindsight, it is clear to me what has mattered most: it is the respondents I have talked with, spent days if not several evenings with, enjoyed experiences with, and shared, temporarily, in their recollections of painful times. It is they who leave the imprint on the retina. The empirical work has been the richest and most exciting part of the whole research exercise. I was loath to put it down. The moment of closing my fieldwork and sitting down to analyse and write up my data has proved to be the most difficult exercise of all.

I have, perhaps, opted to do one of the more difficult tasks in sociological research. Any research investigating a social problem runs the risk of becoming bad sociology because of its instrumentality. It can so easily fall into the trap of becoming simply a piece of well organised 'action research', or what T.H. MARSHALL (in BULMER, 1977) has trenchantly called "the aimless assembly of facts".

It is, as GLASER and STRAUSS (1968) note, the provision of a theoretical framework with which to make research relevant which is "the distinctive offering of sociology". Thus, whilst my research stance was broadly interactionist, it was only with the gathering of data that a recognition of which sensitising concepts provided the tightest explanatory framework emerged, thus rendering a furthering of theoretical insights possible.

It was empirical work which I wanted to do. LOFLAND (1976) says:

"To do something, you need to look at it. Direct empirical observation is .. the basis of social, or any science".

Without this approach, the researcher has no way of checking his own pre-suppositions, perceptions and inferences with first-hand data. His subsequent analysis, Lofland argues, is likely to be not only "ethereal and empty" but inaccurate. To have addressed myself to a thesis divorced from the world of experience with human beings would have seemed to me a sterile exercise.

The real task, then, has been to make good sociology from the data. I have found LOFLAND's approach particularly congenial: that of combining what he terms "intimate familiarity" with "disciplined abstraction". I have endeavoured to follow his many precepts, although the extent to which I achieved "intimate familiarity" varied from respondent to respondent, and tended to increase with time.

There are so many methodological issues involved in doing research that one is in constant danger of becoming so overly self-critical and pre-occupied with methodological argument and counter-argument that a kind of intellectual paralysis sets in. Every stage of research is so beset with problems and questions that if one were to deal conscientiously with them all, no meaningful research would ever get done.

I have thus chosen to deal with the intricate intertwining of method and methodology narratively, following the research process chronologically. Some of the more fundamental methodological issues will emerge en route.

In addition, I have consciously endeavoured to be as explicit as possible about the whole research process, in an effort to make the work replicable. I have tried to provide systematic information on my research methods, the theories and shifts in theoretical position which took place, the assumptions about social behaviour which guided my enquiries, and the situations in which observations were made. Where detail might become tedious

I refer the reader to the various numbered appendices.

My orientations were exploratory. The study was not designed to establish generalisations about all hearing impaired people. Sample size and lack of representativeness constrained me. My aim was to investigate broadly how the hearing impaired, as a group, perceived their employment situation, and the strategies they used to make sense of the often negative evaluations to which they were subject from colleagues and employers. The stance was an 'emic' one: in MALINOWSKY's oft-quoted phrase: "to grasp the native's point of view, his relation to life, to realise his vision of his world" (in PELTO and PELTO, 1978). In other words I wished to approximate as far as possible the 'realities' of the experiences and perceptions of my respondents, and look at the routines and 'accounting procedures' adopted by the hearing impaired in interaction with a hearing world of work. I was not concerned to test a set of pre-formulated hypotheses.

My original approach, however, was predicated on the use of both qualitative and quantitative data. During the research period, my thinking regarding the relevance of the latter underwent a radical transformation. I have come to rely quite unashamedly on an interpretative approach as the most effective means of grasping the complexities of the subject.

1. ACCESS TO SHARED MEANINGS

One of the most taxing problems about doing interpretative research is the extent to which one may claim to be successful in achieving that "privileged access to shared meanings" (PLATT, 1982). A partial answer is given by DOUGLAS (1971): "There is no way of getting at the social meanings from which one infers the larger problems except through some form of communication with the members of that society or group; and to be valid and reliable, any such communication with the members presupposes an understanding of their language, their uses of that language, their own understandings of what the people doing the observations are up to.."

Because communication is at the very crux of this thesis, both a metaphorical and literal interpretation of DOUGLAS' stress on "an understanding of their language" is necessary.

I contend the issue is only partially resolvable. To argue that "social actions are meaningful" and can be studied and explained "in terms of the situations and meanings they have for the actors themselves" still does not adequately tackle the question of how one is to determine what these meanings are. DOUGLAS' further argument, that reliance must be placed on "...our understandings of everyday life, gained through direct observation of that life and always involving the use of our common-sense understandings derived from our direct involvement in it" neglects the many occasions when our common-sense assumptions and understandings are, crudely, 'off-beam', and actors are talking past one another.

It is, I suggest, by no means always possible to assert that "there is a socially shared system of symbols and meanings, and that the meanings conveyed by linguistic and non-linguistic behaviours .. are clear and agreed upon by most societal members" (PHILLIPS, 1971)

Whilst this may more generally be the case within one's own society, anthropological research has found to its cost that this cannot be taken for granted in studying primitive societies. And whilst the difference may be one of degree rather than of kind, the same assumptions can not legitimately be made about a hearing person's view of the symbolic universe of the hearing impaired.

The literal question of understanding the language of one group of the hearing impaired population - in this case sign language, which additionally involves a transposition from different verbal/verbal modalities to a verbal/visual modality - means that common background experiences upon which to draw are not available. As NASH and NASH (1978) note, the hearing person

"draws upon culturally rather than sub-culturally distributed meanings".

For both signing and, I would suggest, profoundly prelingually orally deaf people with no 'standard' vehicle of communication, "... spoken English does not mean the same thing for the purposes of social interaction to the deaf that it means for the hearing user".

It could not thus be assumed that the other actor's stream of consciousness was broadly similar to that of the researcher.

The question of how a researcher, investigating a particular culture such as the signing deaf community knows that the meanings he attaches to his

subjects are the 'real' ones when he is not, and cannot be, a member of that particular symbolic universe, presented very real practical and methodological difficulties to me. (How I attempted to penetrate that world will be described later).

Thus I contend the most that may be hoped for are approximations to such shared understandings. These, of course, will vary. But the clear impossibility of directly intuiting another's experience, even in face-to-face encounters has been vigorously treated by SCHUTZ (1972). To do so would mean, as he says, "... you and I would be the same person".

Nevertheless, despite the impossibility of identifying 'truth', the researcher can get close to the subject and at least approach that 'hidden shadow inside the head' by way of the research strategies I used. Whilst "privileged access to shared meanings" is the ideal, actual research practice has to content itself with less than the ideal. But in the absence of anything better, "...we will continue to rely upon common-sense knowledge and everyday language for negotiating our field studies". (CICOUREL, 1964). It is the most - and the best - the researcher can hope to achieve.

2. ENTERING THE RESEARCH SITUATION: PARTICIPANT OBSERVATION

The tools for achieving this are traditionally those of participant observation and interview. The balance between the two activities varies, understandably, from sociologist to sociologist. Whilst the subject matter of the research indicates the most appropriate strategies - and thus the use of questionnaires to study the hearing impaired was quite out of the question - these happen to be the tools with which I am most familiar and have some skill in using. What would have been ideal, but was ethically unfeasible, was participant observation of respondents at work.

Although interviewing formed the bulk, time-wise, of my personal contact with the hearing impaired, it was not embarked upon before I had achieved a degree of sensitivity to the issues involved, by means of participant observation.

My activities represented an attempt to penetrate what deafness means to the hearing impaired through "learning by direct experience" (PLATT, 1982) where possible. This entailed being with hearing impaired people and the adoption of roles to facilitate acceptance. These changed over time and varied according to the situation. But the move was generally from researcher to friend.

Participant observation involved visits to schools and participation in class at Heston. Oak Lodge and Donaldsons Schools for the Deaf; visits to all the organisations responsible for various groups of the hearing impaired; membership of a branch of the Breakthrough Trust; attempts to learn sign language; and last, but not least, a period of 'total immersion' in a deaf minority-turned-majority status culture at Gallaudet College for the Deaf in Washington, March 1981.

(a) Gallaudet

This latter turned out to be the most significant experience of my whole research period. Total Communication¹ was practised only by some, principally hearing, members of staff. The dominant modality was American Sign Language (ASL). Lacking proficiency in that* together with my total unfamiliarity with the American one-handed manual alphabet led to a complete reversal of roles. Socially, I was a hearing 'Outsider' in a deaf culture.

'Conversations' would start, falter, and then collapse with recourse to pen and paper. An animated sign dialogue would start up on one side of the table, leaving me neither deliberately, and certainly not maliciously, but very effectively excluded. In time I came to adopt some of the strategies which my hearing impaired respondents themselves were later to describe to me so graphically.

I regard this as the most positive, if salutary, experience. No other
* Only about 25% of the signs are similar to those of British Sign Language (BSL). It must be noted, however, that those fluent in BSL appeared to have little difficulty in adapting to ASL. So it is with sign systems of other countries and accounts for the limited use of Gestuno, the 'International' sign language.

situation could possibly have provided me, over a sufficient time-span, the chance to simulate what it is like to be deaf in a hearing society.

The programme also allowed for 'matching-up' with a deaf postgraduate student. This afforded me a quite unique opportunity to penetrate his world. It was one which, unlike that for the deaf in England, espoused a counter stigma ideology. At Gallaudet, deafness was something to be proud of. For instance, he and his profoundly prelingually deaf wife were expecting their first child. As he suffered a form of hereditary deafness, the statistical chances of the baby being born deaf were therefore quite high. That this was something to be welcomed initially came as a profound shock to me. But, as he explained, every facility was available for the socialisation of a deaf child. Not only the environment but his own very positive evaluations of his handicap were geared to maximising the potential of such a child. The irony was that a hearing child would be an 'outsider' in that environment.

The sense of shame, humiliation and constant denigration suffered by many deaf people in the UK was marvellously absent here. It was an exhilarating, if exhausting experience (PINDER, 1982). Yet, apart from the courtesy status extended to me as a visitor, it was a world within a world whose members were protected from the slights of the hearing majority 'outside', (cf. GROCE, 1980). To what extent this can be sustained is a matter of on-going debate.

(b) Learning to Sign

I returned to the UK determined to tackle anew the task of learning sign language as a gateway to this deaf world². My first two forays had been less than successful. Teaching at the City Literary Institute was creative, imaginative and resourceful, as well as providing an introduction to the whole spectrum of sign³. However, with 12 weekly evening classes and one 3-day intensive course, quite divorced from contact with deaf people, I have to

concede I showed little flair for it.

I fared little better with lessons later at the Breakthrough Centre. Emphasis was located heavily at the Signed Exact English end of the spectrum, rather than the 'pidgin' sign taught at the City Lit., although the teacher herself was profoundly and, I suspect, prelingually deaf. Every definite and indefinite article, pronoun and other 'colourless words' had to be finger-spelt⁴. I was to discover later that the signing deaf do not talk to each other this way. Each session was devoted to learning long lists of vocabulary, using, for example, one and two index fingers, one and two flat palms, one and two thumbs. Confusion was rife, and no between-group dialogue in sign was encouraged in class where the vocabulary could be applied.

It is difficult to be objective about failure and try to analyse why it occurred. In re-living the experiences for the purposes of analysis, there is the danger of relapsing into bathos and personal defensiveness. Nevertheless, an obligation lies upon the author to try.

Perhaps some explanation lies in the stress on visual memory. There was nothing in print to reinforce what we were being taught at the City Lit.,⁵ (although at Breakthrough, we were provided with Makaton sign illustrations which would have helped if sign dialogue had been encouraged⁶). My previous orientation towards learning languages had always been 'academic', auditory input being supplemented with visual, textbook revision*. Evidently, my visual memory was poor, or untrained.

However, when I set out to test this, I found it not entirely consistent with, for example, an above average ability to memorise musical notation. What I did find was that memorising Beethoven sonatas on the piano was a very much easier task than memorising those of Schubert. Schubert's piano

works are characterised by very similar configurations of notes, changing
* Mrs. Martin Colville informed me that in Denmark, Sign is taught 'academically' for those who prefer it, rather than relying on the kind of extended 'Look and Say' methods of the City Lit., so that the rules of sign, such as positioning and modulation, are made quite explicit.

often only by a semi-tone as the melody progresses.

Similarly, signs look so much alike and cluster closely, particularly round the finite points of the face, and body. It is often only the minutest variation in hand or finger positioning which conveys the difference in meanings. Moreover, sitting opposite the teacher meant having to transpose, mirror-wise, the actions of her hands. A palm displayed outwards had an unerring tendency to turn itself inwards towards my body; an action with a left hand invariably found its way to my right hand; an index finger gesture somehow expanded itself into two index fingers.

The essence of successful signing is fluidity of movement and rhythm. Fluency evaded me. What I managed to achieve has been described as 'sign stammering', in that my movements were jerky and unco-ordinated. Again, this is inconsistent with the author's manual dexterity in other spheres.

Another factor is sign language's greater reliance on iconicity⁷, the art of improvisation, and the ability to mime a situation so that its meaning is clearly articulated and intelligible physically, even if the sign itself is forgotten. Performance calls for a certain shedding of inhibitions. The face and body must express what the hearing impaired lose above all else - affect. Many hearing people find such apparent 'over-demonstrativeness' difficult.

The crucial point, however, seems to be the need for reinforcement through practice with signing deaf people. One is caught in something of a 'Catch 22' position here. Penetration of the deaf community is essentially dependent on some mastery of their language (JACOBS, 1980; HIGGINS, 1980; BECKER, G, 1980). But one cannot go into the deaf world to learn their language as one would visit a foreign country, such is the distrust of 'hearies'.

In my defence, I would argue that I was at a disadvantage at that time: as I had no one with whom I could practise between classes. Most of the other participants either had deaf relatives, or were themselves social workers or

teachers with the deaf, and were thus in daily contact with signing deaf people. This did appear to correlate well with superior performance (KYLE and WOLL, 1980). The same absence of practice characterized lessons at the Breakthrough Club.⁸

I had, however, elected to research and make comparisons between different groups of the hearing impaired. For a truly comparative study to be made, somehow the signing deaf had to be included. When it came to interviewing, I had considered in advance the possibility of enlisting the help of an interpreter. Even had one been available, there would have been transport and payment difficulties. Moreover, not only do third parties impose additional distancing between researcher and subject. Interpreters act as controllers of the interaction, affecting both outcomes and the general tone of an encounter. Outcomes may be crucially manipulated, depending on whose side he/she is. And with a fast interchange of sign, I would have no means of checking that what was being signed and translated back to me in spoken English had not suffered significant distortion of meaning in the process.

I eventually resolved the problem with the help of two social workers for the deaf whom I had accompanied to Gallaudet. They initiated a series of introductions for me, so that I could have one-to-one tuition in sign. It was a question of simply 'following my nose', but it led to a penetration of the deaf world which a conventional reliance on sign language classes could never have given me. With my informal teachers, I went to parties, spent days in peoples' flats, visited one 'tutor's' workplace, and was, at least partially, accepted into their world.

Miss M.A., the 'tutor' with whom I had most contact, initiated other contacts for me. It was often only by virtue of her initial presence that I was permitted entree to a chain of other contacts. Without the active presence of such a facilitator, I should have been quite blocked, such is the perceived threat hearing outsiders pose to the fragile meaning structure of the deaf. And I learnt passably adequate sign language.

This illustrates how the adoption of a non-threatening role, that of tutee rather than researcher in this case, can lead to access to subjects who are otherwise rightly suspicious of the motives of 'hearers'. And, in the event, my tutors were mostly happy to use the interview format as an additional basis for teaching me how the signing deaf communicate with each other.

Thus, what was initially a failure opened the door to worlds which would otherwise have been inaccessible to me. I was, as a result, much better equipped to draw on the complexity and richness of the stories my signing respondents had to tell.

(c) The Breakthrough Club

A further on-going activity which lasted for a year and a half was fortnightly attendances at one of the local branches of the Breakthrough Trust Deaf-Hearing Group. An ability to play table-tennis well was a more effective passport to my initial acceptance there than any other role as researcher or helper (although the former became acceptable in time).

In many ways the Club is a unique organisation, with its emphasis on the integration of the hearing impaired into the hearing world, focussing on the development of friendships between deaf and hearing people. It represents a courageous attempt to break down similar barriers amongst the hearing impaired themselves, as well as to integrate those with other, often multiple, impairments into the wider society.

It is, perhaps, early days to draw more than tentative conclusions as to its success. Undoubtedly it did what no Deaf Club, to my knowledge, has yet succeeded in doing, namely attracting a wide range of people with differing impairments to its doors.* Crucially, the profoundly prelingually orally deaf who tend to be snubbed at Deaf Clubs⁹ found a sanctuary there. Paradoxically, the only group it did not attract was the signing deaf. Occasionally groups would arrive, find that few, if any, members of the Club able to sign well enough - and certainly not use BSL - and leave.

* One respondent, at corroboration interview explained "Most deaf don't like to be classed with the disabled. They cling to a concept of normality".

According to NASH and NASH (1978) this latter is hardly surprising. A Club focussing on integration, with its emphasis on speech and hearing, they argue, would probably be farthest away from any genuine sympathy with sign. The 'Deaf' experience is evidently perceived to be very different from the 'deaf' experience.

The question, 'Does integration work?' is part of the much wider integrationist/segregationist controversy in the hearing impaired world. It is now couched in linguistic terms: "BSL users" and "English-speaking users", corresponding to the old oralist (hearing)/manualist (deaf) dichotomy. Break-through is firmly hearing in its orientation, and its aims essentially reformist. An inconsistency highlighted by RYAN and THOMAS (1980) does seem operative here: both reformists and outright segregationists assume that the problem inheres in the hearing impaired person himself. The question is rarely asked why society as a whole is so unwilling to integrate the hearing impaired.

This is not the place to be drawn into the controversy, although it permeated much of the research exercise and was to be a focal issue in gaining access to signing deaf respondents. Suffice to note that the Club perhaps provided a base from which, potentially, cultural values could be preserved whilst acquiring a nominal acceptance of majority values necessary for survival. This is a feat performed by some minority groups better than others (VERNON and MAKOWSKY, 1969).

What all these and other participant observation activities enabled me to do was to sensitise myself to the way various groups of the hearing impaired viewed their world, and its interface with the dominant hearing majority. When I did embark on interviewing, I had thus achieved some understanding of the meanings 'deafness' held for people. I contend this disposes at least in part with one of the criticisms to which I was subject: that of the non-credibility of my research for want of familiarity. And it also deals with the difficulties of acquiring access to shared meanings, the question raised at the beginning of this chapter.

3. COLLECTING MY RESPONDENTS

Much consideration was given to the question of what sources to approach for a sample. This is fundamental to any evaluation of the validity of the inferences I was ultimately able to make. (Reliability poses a rather different problem - to do with the use which is made of the data, rather than the nature of the data itself. But it cannot be dismissed as an unnecessary luxury because of an acknowledged "lack of commitment to scientific method" (OLIVER, op.cit).

Nevertheless, validity is the prior issue. Thus a description of the problems I encountered in the actual collection of a sample is, I consider, a neglected but essential part of the whole research exercise. I have described how I endeavoured to sensitise myself to the issues which make hearing impairment problematic. Access to subjects to interview raised further difficulties.

To reiterate, the focal point of my thesis was my wish to do a comparative study of the hearing impaired. This had an important, and quite unanticipated by-product in restricting access to data sources. (In fairness, it must be conceded that my arguments concerning the illogicality of this position were insufficiently developed at that stage, perhaps, to persuade these gate-keepers of the legitimacy of such a stance - not that people ever like to be confronted with their own irrationality.)

However, the response that my efforts to do a comparative study evoked in more than one quarter is such as to justify some discussion in itself. It was against such a background of some professional antipathy that I conducted this research.

(a) The Comparisons Controversy

The long and well-established tradition of comparative sociological studies is something which, perhaps, tends to be ignored by critics from other disciplines, particularly the 'hard' sciences. Not only were such studies not confined to intra-societal comparisons, With the burgeoning of

anthropology, comparisons straddled the world. MARSH (1967) has noted:

"From the time sociology crystallised as a distinct discipline, it has been committed to the comparative study of societies, culture and their institutions".

Moreover, GLASER and STRAUSS (1968) have highlighted the value to sociology of such exercises in broadening sociology's theoretical base and increasing its explanatory power. I was thus totally unprepared for the resistance that my broad interest in hearing impairment met.

A statement from BEST (1943) written nearly 40 years ago, bore little resemblance to the scene with which I was confronted. He wrote: "There are no sharply dividing lines between the different degrees of deafness, one shading off imperceptibly into another".

I was presented with a scenario stressing the absolute uniqueness - and therefore incomparability - of different groups within the hearing impaired population.

Yet it is precisely the contribution of a societal reactions perspective which demonstrates the uniformity with which those who possess one particular trait (hearing loss), and its concomitant departures from culturally expected speech performance, tend to be evaluated by society generally¹⁰. Perfectly valid differences are glossed over.

The very function of cultural stereotyping is to show how an individual becomes "nothing but an instance of the discredited" (SCHUR, 1980). As I propose to demonstrate, this is a process which is not confined to any one particular group of the hearing impaired, although, as I shall argue, the extent of negative typing varies with the degree to which communicative performance is seen to deviate from 'normal'. A question professionals in the field always fail to answer is: why, if the problems of the hearing impaired are held to be so intrinsically different, does such relative uniformity of perception by others occur?

Initially, the controversy was presented to me in terms of the im-

possibility of comparing the post- and prelingually deafened, their problems being so different and mutually exclusive. It was not until much later that I realised it was the signing deaf (generally but by no means universally prelingually deaf) who were held to be so 'intrinsically different'. Thus I sought for explanations which, with hindsight, still contain some elements of truth, but which failed to satisfy my quest for an answer to what seemed to be a quite irrational resistance to looking for similarities.

One possibility, I suggested, might lie in the unfamiliarity with perspectives which other disciplines than psychology, audiology or educational philosophy traditionally offered by way of explication.

A further possible explanation was that resistance appeared to come largely, although not exclusively, from workers and organisations for the deaf. (The preposition is important). It seemed that the maintenance of such rigid demarcation lines between different sections of the hearing impaired population served highly functional purposes. Specialisation in the problems of one or other group tends to create a rather particular kind of ideological in-breeding, so that any possible room for a commonality of interests would tend to be rationalised and rejected.

My approach to the various groups bore out such a contention. One was made uncomfortably aware of a 'whiff of proprietoriness' about 'their deaf'. Whilst lip service was paid to the idea of welcoming a researcher into the deaf world, in practice the possibility that this might introduce different perspectives on their work was perceived as extremely threatening. The resistance was such as to suggest strongly that professional kudos and vested interests were very much at stake.

Another reason I felt consistent with the directions which research has taken was the dominance of the medical and paramedical professions, particularly those of clinical and educational psychology and the newly emergent audiological profession, with their adherence to an individual pathology model of hearing impairment. Although primary clinical loss cannot be denied,

"it effectively masks other aspects of /their/ social existence", as RYAN and THOMAS (1980) note of the 'mentally retarded'. Most importantly, it individualises the problem: its social construction is obscured.

The clinical case at its strongest has been put by DENMARK (1978):

"..the problems of the child who is born profoundly deaf are of an entirely different order from those of a person who loses all hearing in adult life. The born deaf child has a sensory deficit which interferes with all aspects of his development, while the person who is deafened in adult life suffers a sensory deprivation which may affect his whole life-style and call for many readjustments. Deafness which is present before the development of speech and language (prelingual deafness), and deafness which is acquired after this stage (postlingual deafness), therefore, have entirely different implications ... The effects of the one .. are developmental, of the other, traumatic. They cannot be equated".

Let me be quite clear as to what it is that I am, and am not, saying.

I am not disputing that, other things being equal, the earlier the onset of hearing loss, the more difficult it is to acquire language, and thus communication skills, because of the problems inherent in actually having to learn one's native language.

However, this by no means universally holds, depending on such factors as the degree of residual hearing, how one defines prelingual, and a whole battery of psycho-social factors. CONRAD's (1979) few "oral successes" have to be accounted for - (I netted one in my sample, Miss C.G.) Nevertheless, for the numerically few children born with no useful residual hearing, the statement probably holds. But for a child who acquires hearing loss at the age of 18 months and still has some useful residual hearing, ie. the prelingually hard of hearing child, where is one to draw the line?

Not only do some prelingually deaf subjects master language and speech with varying degrees of success, and acquire sufficient communicative competence to enable them to participate, to an extent, in the hearing world. Significantly for my argument, some subjects postlingually deafened, although possessing language, lose the ability to monitor their speech, giving rise to discordant pitch, inappropriate intensity, rhythm disturbances, and, in some cases, the complete loss of effective speech performance. As noted in

Chapter 1, the non-lipreading, totally deafened adult is as much of a social cripple as her profoundly prelingually deaf counterpart. As it is the evaluation of communicative competence with which I am concerned, it is worth remarking that even clinically, "Impairment of oral skill is evident not just with profound hearing loss, but with quite minor loss of hearing" (CONRAD, 1979).

Thus I was not disputing the very valid differences in adaptive patterns between the born deaf who have no cognitive experience of what it is to be hearing, and the often traumatic role changes which are necessary for those deafened later in life. Indeed, my discussion on strategy management takes the different socialisation processes to which these two groups have been exposed very much into account.

However, what I had totally underestimated was the tenacity with which the oralist/mamualist schism still dominated current thinking. I had walked unknowingly into a field torn apart by the kind of internecine strife and dogma characteristic of wars of the Middle Ages. BENDERLY (1980) refers to the situation as "...an ideological maelstrom swirling round the apparently simple question of what it means to be deaf".

The fact that the debate really centred round the use of BSL and socialisation into a deaf culture, as against integration into the hearing world as a 'deaf but deficient' English speaking person, was not only obscured at the time by the use of the pre-/postlingual dichotomy. Actually the debate had shifted in a sense. And a debate-within-a-debate (the preservation of BSL against its adulteration by the use of S.E.E.) had surfaced. The implications of this only became apparent to me toward the end of my research, coincident with the emerging militancy of the signing deaf community. Thus the issue became not one of the impossibility of comparing the pre-and postlingually deafened. It was the signing deaf who constituted a 'unique' group. Looking for similarities, it was argued, was to deny the reality of their own, very special experience of deafness. The question of

whether or not exclusion was also to apply to the profoundly prelingually deaf without this special means of communication was somehow conveniently 'fudged'.

However, I contend that the validity of my perspective still holds with-
out in any way denying the 'reality' of socially participating in a distinc-
tive culture. The deaf come to belong to this culture by virtue of the many
social processes I will describe. As noted repeatedly in the literature,
(HIGGINS, op.cit; BENDERLY, op.cit; BRIEN, 1981) the signing deaf are not
born into the deaf community. Thus if the culture is open to societal in-
fluences, it strengthens, rather than weakens my case for including its mem-
bers in my comparative study.

I return to my unifying theme : the way society tends to negatively
evaluate speech incompetence. The signing deaf rarely use what speech they
may possess sensing, correctly, the scathing reception it is likely to evoke.
As with my orally deaf subjects (pre- and postlingually deafened), it is the
lack of, or disturbance in, effective speech performance which poses such a
threat to the taken-for-granted assumptions about ease of interaction. To
the extent that these expectations were breached, all groups (including the
signing deaf) tended to be fairly uniformly categorised as deviant.

Attempts to accentuate differences not only distorts the very real simi-
larities of discrimination experienced by all groups of the hearing impaired.
It also has broader political consequences: the intent to preserve rigid
demarcations amongst 'the deaf' seems to be entirely inimical to any success-
ful organisation to improve the lot of the hearing impaired as a whole. The
benefits accruing to the signing deaf in the States appear to have had little
impact on their orally deaf counterparts. The new militancy amongst the UK
signing deaf seems also set to exclude.

This research is designed to offer an alternative way of looking. To
focus on much neglected similarities and commonalities of perception is not
to be equated with minimising or denying the validity of very real differences.

It is simply that the latter have been given a hearing. The former have not.

Thus my attempts to pinpoint the illogicalities of this resistance may appear to be divorced from the 'realities' of the social context of the controversy. However, I will set out my arguments for readers to judge for themselves the validity of what is evidently an unpalatable perspective from both sides of the great divide.

I contend that in the first place, it is a total non-sequitur to say that because there are significant differences between (a) and (b), therefore there are no significant similarities. Indeed the very fact of insisting on differences presupposes that comparisons have been made.

To take the counter-argument a little further: if it is then argued that the differences are so great that it is not worth looking to see if there are any similarities, the fact that there are such large differences gives more, not less, point to an examination of different groups. Moreover, the onus is on the critics to prove their 'chalk and cheese' position: mere assertions will not suffice. Similarly, it is for the researcher to prove their assertions to be incorrect by systematic investigation.

The reductio ad absurdum of the argument being made in favour of concentrating on one group only might be illustrated thus: if one studies, for example, the profoundly prelingually deaf as one group, then distinctions must surely be made between young and old, male and female, those of low socio-economic status and those better endowed. Critics must answer the challenge: how is anyone to argue that there are not going to be sufficient differences within this one group to vitiate the whole exercise?

The use of analogies may hopefully dispose of the problem. One such would be for critics to assert the impossibility of studying the adjustment of Asian girls in British society because some are Hindu, some Moslem and others Buddhist. Or to say that one cannot study the problems of homosexuals because of the inevitable differences in experience of the law between older and younger homosexuals. It is, I maintain, arrant nonsense to argue that

one cannot draw any conclusions about Asian girls or homosexuals, because the apparent differences amongst them are too great.

And so it is with the hearing impaired. Their commonality lies in the fact of their hearing loss (of whatever severity, age of onset) and the general tendency for the hearing public to conflate all hearing impaired, regardless of manifest differences in ability, generally at the lowest common denominator of competence. The social process of applying fairly uniform categories and stereotyping all those with one particular trait is the overriding issue.

It is salutary that interviews with some, although not all, respondents showed a real desire to mix with, and be accepted by, these apparently mutually exclusive groups. Two implications which may be drawn are: (i) that the factionalism which characterises the hearing impaired world is indeed an imposed one; and (ii) in some cases, it has worked so successfully that ne'er the twain shall meet.

If the sociological perspective which I have, perforce, briefly indicated here - and will discuss fully in the next chapter - has anything to offer, it is not to contradict the clinical and cultural models. It offers an alternative way of viewing which, I suggest, adds significantly to our understanding of the processes which make hearing impairment problematic.

(b) Access to sources

Thus because of the lack of support encountered from some quarters at my decision to do a comparative study access was, perforce, limited to those workers and organisations who responded favourably to the idea.

As initially I had no credibility within the 'deaf' world without a mastery of sign language, my early enquiries were directed towards obtaining a sample which excluded this group. Only later was I able to include them. The question of penetrating the world of those orally profoundly prelingually deaf with no vehicle of communication other than natural gesture and home-made sign was not presented to me as similarly problematic. Professional pro-

propriety, I discovered, seemed to be reserved almost exclusively for the signing deaf, (and the adventitiously deafened, to a lesser extent).

It therefore became quickly apparent that any attempt at randomness was quite unfeasible. Not only was I deliberately excluding a sector of the hearing impaired population, but, at the other end of the spectrum, not even the most assiduous sampling of audiology clinics could guarantee that I was tapping that hidden population of the hearing impaired who simply do not present (HERBST and HUMPHREY, 1981; HAGGARD et.al., 1981) - not to mention the difficulties of achieving co-operation from busy hospital clinics (BIRD and TREVAINS, 1978; TREVAINS, 1982).

I decided to try and minimise bias by sampling various small sub-groups with varying characteristics, rather than concentrate on one source alone, which has been the traditional modus operandi of many researchers. Such a strategy emerged as the data collection process proceeded. It is one in line with the persuasions of authors such as GLASER and STRAUSS (op.cit) who argue strongly in favour of studying multiple comparison groups and sub-groups, drawn from as many sources and organisations as possible.

A list of the organisations and workers in the field I contacted may be found in Appendix 4. Ultimately, I collected a sample of 6 sub-groups and interviewed 50 respondents, covering a range of clinical loss and modes of communication.

Successful forays were as follows: Permission for 11 respondents registered at Hillingdon Social Services Department to be interviewed was given through the kind offices of Mrs. Betty Langford, although all control regarding the selection of subjects was taken out of my hands, beyond the specification of the criteria I drew up (of. Appendix 3).

From two sources, the Employment Rehabilitation Centre, Perivale, and the Royal National ENT Hospital, Grays Inn Road, I was allowed access to the files - the first with ease and assistance, the second with the exercise of

some persistence. Thus respondents were purposefully selected, in that I took names and addresses from the files of those I judged to be typical for the purposes of my investigation, and to correspond with the criteria I had specified.

The former source had no audiometric information to guide me. As this applied to all my other sub-groups, unfortunately I did not make full use of the information available at the ENT clinic. I 'cleaned out' the 'postlinguals' filing cabinet, and dipped into the 'prelinguals' (only to find some cases not deafened until 18 months or 2 years of age, and with varying degrees of hearing loss). I hoped, however, with this source, to redress a possible class imbalance which may have affected my other groups, the catchment area for 'postlinguals' being confined to Islington.

Similar facilities were generously offered by Ms. Jackie Hartley, Chief Audiometrician of the Audiology Department, Hillingdon Hospital. This was a data source approached much later in the fieldwork process and ironically, in view of the initial difficulties I experienced in recruiting subjects, remained unused.

The relative ease, however, with which confidential medical information was made available to me occasioned some disquiet - regrettably after the event. On one occasion, my information relating to a respondent's hearing loss as prelingual conflicted totally with his own perceptions of his loss occurring postlingually. Trapped in conflicting loyalties, honesty to the respondent seemed more important. However much this may reduce the opportunities for future access to data, it is ethically quite unfeasible for research workers actually to have access to medical information without the knowledge and permission of the respondents in question. As far as the latter were concerned, all they were aware of was the audiologist's permission for me to contact them (cf. Appendix 5).

Other respondents were collected as my network of contacts - and credibility - increased. The Director of the Breakthrough Trust gave me an entrée to the

Michael Flanders Centre in Acton. Whilst understandably stipulating that no interviewing or distribution of questionnaires were to be carried out on the Club premises, over the months I became friendly with, and subsequently interviewed, 9 respondents. Selection was a function of their motivation to be included, their adherence to my criteria, and, in the initial stages, relative ease of communication. As my own skills increased, however, I was able to interview those whose communicative skills were more grossly handicapped. Additionally, I also selected respondents who were hearing impaired but seemed to have few problems.

Similarly, my contacts with Mrs. Maureen Beaumont, lipreading tutor for Richmond and Hounslow and herself profoundly deaf, gave me access to her classes. I spent a successful evening at Richmond talking about my project, concluding with a request for volunteers. Subjects were given the means to contact me if they wished to participate, and 2 did so.

My husband, as Director of the Foundation Learning Unit for the Adult Disadvantaged in Hounslow, introduced me to the Hounslow lipreading tutor, and through the kind offices of Mrs. Mack, 3 respondents were recruited. A further 2 respondents were found via Hounslow Literacy classes, thus giving me access to those profoundly prelingually orally deaf who are additionally functionally illiterate.

It is impossible to ascertain to what extent those who did volunteer were 'typical'. Attendance at lipreading, literacy classes and a Club presupposes a degree of motivation which may well not characterise the hearing impaired population in general (HERBST and THOMAS, 1980; BEATTIE, 1981).

My final, and richest data source was unofficial. I can only describe it as a 'snowballing' one. It was the result of my decision in May 1981 to include within my sample a number of signing deaf. Following my visit to Gallaudet, I realised I could actually tackle much 'deaf' subjects than I had hitherto thought manageable. How I dealt with the problem of language has been described in the section on Participant Observation. It led to the

acquisition of 6 signing respondents, and the development of a friendship network into which few hearing people are welcomed.

Thus, although the sample I eventually obtained can in no way be considered representative (and the conclusions and inferences I am able to draw from it tempered accordingly), certain very positive statements can be made about it. All respondents had at least three factors in common: (i) They all had, to a greater or lesser extent, a hearing impairment; (ii) Although my 'snowballing' group had not been approached via the traditional route of membership of a Deaf Club, all respondents had either presented, or been referred to, organisations which catered in one way or another for their particular impairment. Signing respondents were firmly located within the 'deaf community'; (iii) All worked, or had worked, in a hearing environment, and, it was surmised, were exposed to similar social influences and pressures.

The use of a range of sub-groups, selection of whose members was at times under my control, at other times not, and the use of both official and unofficial sources is, perhaps, not far short of representativeness.

Ultimately it was, as PRINCE (1967) argues of his work "... much more representative than it would have been if it had been selected entirely from one source".

4. ONE SIDE OF THE PICTURE: THE SUBJECTIVE RESPONSE

The problems posed by relying on the perceptions of only the hearing impaired themselves, and the actual difficulties inherent in communicating with a population covering a diverse range of communication skills occupied much of my thoughts and energies. They are not confined to problems of evaluating claims to successful access to meanings; nor to the difficulties involved in retaining the integrity of the data, with its inevitable translation into what PHILLIPSON (1980) describes as "highly institutionalised sociological language". More fundamentally, they raise the issue of the status and credibility that this kind of knowledge can legitimately claim to have, and are intimately interwoven with problems of validity and reliability.

In many instances - and interpretative sociology is an example par excellence - we are unable to give sound or valid reasons in support of our claim to knowledge. Thus, if a number of propositions are inconsistent, by reference to what criteria does one decide which is the right one? 'Right' is possibly not a meaningful question anyway, and PHILLIPS (1971) would argue that there are no deciding criteria. I would disagree. Whilst the problems of validity and reliability - and thus of replicability, predictability and refutability - are more difficult in the social sciences owing to the sheer complexity and instability of the data under investigation, I have attempted to adhere to the standards of good practice which are a pre-requisite of any rigorous work.

Thus scrupulous attention has been paid to the typicality - the frequency and distribution - of evidence in drawing inferences, and to the inevitable influence that my role as researcher has had on the data. The search for disconfirmatory cases (to be described) has been combined with the use of triangulation as a means of checking statements made by respondents in different social contexts. Whilst replicability is difficult my efforts to be as explicit as possible about the whole research process provide both prescriptions for others to follow and evaluative criteria by which future researchers can gauge the validity and reliability of my study. What can be achieved is a degree of probability to the inferences I will make from the data.

As regards the validity of the data itself, OLIVER (1979) makes a useful point in arguing that "The dominant tradition in social science is to have scant respect for what the individual says".

Yet there is no reason to believe that the respondents I talked with had any deliberate intention to mislead. Thus whilst statements cannot be taken entirely at face-value neither can they be dismissed as valueless. Even if stories do ultimately prove to be 'distorted', they are valid in terms of that respondents' particular relevance structure.

As ARMISTEAD (1974) notes:

"Experience may be intelligible, even if it is not what we might consider an adequate or truthful account of a situation ... in any case, 'distorted' or 'incorrect' experience needs to be adequately explained, not dismissed as irrelevant ... this is not to say that verbal accounts are the last word; people do distort, conceal and lie. But we need good evidence for disbelieving what they report as their experience".

I am not wishing to imply for one moment that the native's view of the matter is the only correct one. There are too many discrepancies between what people say and what they do. Anthropologists, for example, in their reliance on the actor's rules of evidence as sufficient have largely neglected the whole question of how people go about constructing and re-constructing, for different audiences, their personal biographies.

Nevertheless, I have suggested that although the balance between revelation and concealment may vary, a certain consistency of biographical

/contd. over ...

'recollection' emerges over time. This is at variance with the contention of BERGER (1963) who argues: "... common-sense is quite wrong in thinking that the past is fixed, immutable, invariable ... On the contrary, at least within our own consciousness, the past is malleable and flexible, constantly changing as our recollection reinterprets and re-explains what has happened. Thus we have as many lives as we have points of view".

I suggest, rather, that the process of biography reconstruction is geared to establishing a sense of coherence and consistency to happenings. Whilst future events may indeed alter the meanings we ascribe to past ones, the tendency for them to acquire fixed 'identities' - with all the elision and suppression of the unacceptable of which memory is capable - might be said to increase with age. BECKER (1980), for instance, found her elderly deaf sample to have 'tidied up' and integrated events in their lives - a process characteristic of many elderly people. Whilst the average age of my sample was 40/41, there was, however, no way of ascertaining how far such a process had progressed. To a large extent, therefore, my respondents' stories had to be taken on trust.

My decision not to do what the 'rational sociologist' would have done, namely set up a hearing control sample, conceivably confounds the problems of evaluating the validity of the data itself, and the inferences I subsequently make. A complex battery of reasons persuaded me to rely solely on the perceptions of the hearing impaired themselves.

As indicated in Chapter 1, the hearing impaired largely inhabit a world created by the hearing. Hearing adults form their frame of reference, their model of behaviour, and dictate the normative goals to which they should aspire. Reference has been made to the crucial policy decisions made by hearing educators in wilful neglect of the wishes of their hearing impaired charges (MEADOW, 1968b; MINDEL and VERNON, 1971; LADD, 1978; NASH and NASH 1981). Thus, I contend, a concentration on the perceptions of the hearing impaired serves as a very useful corrective to an otherwise unbalanced picture.

Subjective perceptions are one among a number of factors which help to define a problem, and no 'solution' to the problem can occur without taking their perceptions into account. As DOUGLAS (1971) comments, the actions and perceptions of human beings are inherently meaningful, and the chief need, therefore, is to understand human actions and the beliefs and assumptions on which they are based. The chief referent is the internal frame of reference of the actor. Perceptions are of value to the sociologist precisely because they are "... phenomena experienced in everyday life, not phenomena created by (or strained through) experimental situations".

Moreover, such a stance has a respectable sociological pedigree, from WEBER's 'verstehen' and the Chicago School of Symbolic Interactionists to SCHUTZ who affirmed: "... the subjective point of view must be retained in its full strength", without which, he argues, a sociological theory of human action "... loses ..its reference to the social world of everyday life and experience. The safeguarding of the subjective point of view is the only ... sufficient guarantee that the world of social reality will not be replaced by a fictional non-existing world constructed by the scientific observer" (1932)

What has been relatively neglected in the literature is the significance of self-perception for social perception. Positive affirmation from others tends to be translated into positive self-esteem on the part of the recipient. It will be shown that the converse also applies. Thus how people perceive their world tends to structure it to a certain extent. How the hearing impaired perceive themselves to be evaluated by prospective and current employers and work peers, for example, has an important effect on their aspirations and actual achievements.

Finally, my deliberate focus on percepts has implications for the contribution this thesis may have. As noted, the very nature of a communication disorder makes articulation of its victims' plight difficult. However, it is my hope that by encouraging such articulation, difficulties notwithstanding, from a range of hearing impaired people, together with painstaking efforts to preserve the integrity of what they 'say', I hope to have made a small contribution towards politicization of their plight.

Nevertheless, the charge of being 'unscientific' is a very real one. However, I contend there simply comes a point where a sociologist has to accept the overall reliability of what his respondents are telling him about their experiences. I have, to the best of my abilities, demonstrated awareness of the many pitfalls which may beset the researcher in handling this kind of data, and, as a later section will show, done everything possible to counteract such weaknesses. Ultimately, once all the checks have been made, individual cases must be subsumed under the totality of cases. One has to assume that errors cancel each other out to some extent, and that the overall evidence does correspond with overall experience.

5. INTERVIEWING: BREAKING ALL THE RULES

It was not until August 1980 that I embarked on interviewing. The interview situation is problematic in many ways. Not only is it something of an experimental situation for respondents in that "... it leads them to act in ways that are different from the ways they would act in their natural settings" (DOUGLAS, op.cit).

It is also a technique in which the interaction between researcher and respondent plays a vital role in what emerges as data. PAYNE et al., (1981)

put the dilemma neatly: "... sociologists have become exercised by the problem that, as social beings themselves, they import their previous experiences, socialisation, attitudes and beliefs into the social setting that they are studying. They interpret events and create their own version of social reality, which may not be anything like the social reality that the people being studied have".

Yet far from "defining the researcher out of existence" (SHERWOOD, 1980) and attempting to neutralise his influence (the object of survey research) the very fact that the characteristics of the researcher, his personality, the preconceptions he brings to the task, inevitably intrude can be viewed as a positive attribute. Indeed, no two interviewers, however well matched, will ever elicit precisely the same outcome. As CICOUREL (op.cit) notes, it is quite impossible for any interviewer to maintain "... identical rapport... identical detachment .. identical interest".

He is ever responsive to his subject's moods, and whether or not he finds them intrinsically likeable. No interviewer can present himself 'robot-like'

to his respondents.

However, the interview is also a reactive process. A 'chord' struck with one subject may elicit insights quite unique to that particular encounter. What matters, as SHERWOOD convincingly argues, is that the values, attitudes and beliefs "... should be consciously recognised as the attributes ... presented to /our/ subjects".

Data may then be interpreted in the light of this. It is perhaps a burden as well as a freedom that "The interviewer cannot escape from the difficulties of everyday life interpretations and actions" (CICOUREL, op.cit).

These comments do not take account of the very unique additional problems involved in interviewing those with a communication disorder. Although my first few respondents, on the whole, presented less difficulties, they were often quite sufficient for me to abandon many of the rules and practices considered integral to 'good' interviewing, and rely on intuition and 'common-sense'.

The interview schedule I had initially devised has the appearance of being fairly directive (cf. Appendix 6). The rationale for this lay in my anticipation that lipreaders, whom I thought would form the bulk of my sample, would find impromptu dialogue tiring. The extensive use of cards, for example, was favourably commented on.

However, my use of the schedule changed quite substantially and rapidly. The very small pilot study I had done was aimed more at ironing out ambiguities and pinpointing potential difficulties with vocabulary. I reduced the use of 5-point scales to 3, or abandoned them altogether. Gradations, I learnt, are particularly difficult for those with linguistic difficulties. With the inclusion of the signing and profoundly prelingually orally deaf in my sample, and the concomitant decline in respondents' 'standard' communication skills, it was quite impossible to adhere to the original format of the interview. Questions had to be re-phrased and vocabulary constantly altered and simplified. And sign language has its own syntactical rules which often defy transliteration.

Even the second interview schedule I devised (Appendix 7) was too verbally loaded for some respondents. Many seemingly basic words were simply unknown, such as 'unemployment', 'education', 'training', 'apprenticeship'. DEUTSCHER's (1977) injunction: ".sociological sensitivity to language is vital in research"

hardly does justice to these difficulties. Nevertheless, for the purposes of replication, the intent, if not the actual questions, were otherwise conscientiously adhered to. For the purposes of analysis, however, I have used the schedule selectively, concentrating on themes which occurred with most frequency. It quickly became apparent that any value from the questions lay in their being treated discursively. Every encouragement was, therefore, given for respondents to expand on a point. Interviewing quickly changed from passive recording to active engagement in dialogue.

A brief description of some of the problems inherent in interviewing the hearing impaired may prove salutary, although RODDA's (1970) reproof does not go unremarked: "In listing these difficulties, it must be remembered that they represent a challenge to competence, not an excuse for incompetence"!

Every social scientist is apt to claim that his respondents present unique problems in interviewing. I am no exception in maintaining that my respondents did indeed present very particular difficulties because of the nature of their impairment, and the range of communication modes used.

Prior to any interview, the author had to ask Does the subject lip-read well enough to understand me?; Do I have to talk more slowly, or deliberately lower or raise the tone of my voice?; Can the subject read and understand what he reads well enough to compensate for poor speech? And later, How can I convey and receive messages at all if the subject has no comprehensible mode of communication other than gesture and home-made sign?

At its best, interviewing required careful positioning so that my face was squarely in the light. Clear, but not exaggerated enunciation was crucial, and repetitions often had to be made, adding appreciably to

the length of the interview. The fatigue involved for subjects in sustaining lipreading for more than short periods at a time cannot be stressed sufficiently. Frequent breaks had to be created, excuses to 'go to the loo' which equally frequent cups of tea necessitated.

It is often unappreciated how difficult lipreading itself can be¹¹, some two-thirds of all lip movements being either invisible or indistinguishable. Additionally, it presupposes a language base on which to build.

Care with clothes was important too. Striped, or very bright clothing is additionally fatiguing to the eyes of the lipreader. And I had to change long-established habits of simultaneously talking and writing with head down, or moving my head whilst talking to avoid breaking eye and face contact with my respondent.

Adapting to inappropriate or discordant intonation was initially disquieting. One entire interview was held in a whisper with me straining a disconcerting few inches from my respondent's face to hear. At the other extreme, one lady broadcast confidences to the entire house. And one respondent, totally deafened in her mid-50's and either unable or unwilling to learn to lipread, had a box of paper slips ready. Whilst she was able to read my questions, any impromptu response on my part had to be written down. By the end of the interview, the room was a veritable mountain of paper.

As communication skills decreased, many requests for repetition on my part were necessary if a respondent's speech was not clear. Words were often mispronounced so as to be almost unrecognisable. Sibilants and fricatives were omitted, so that plurals disappeared. "Uxbridge" became "Uckbridge". Other words took on an almost 'dyslexic' character: "converse" became "convert"; "compartment" became "department", a "normal" school became a "norman"school. And the syntax of sentences was changed, reflecting a respondent's usage of BSL, such as "some jobs me bully" or "mother looked me job".

The profoundly prelingually orally deaf were often without any tools of communication at all. Interviews - if one may call them that - took place with 3 such subjects, none of whom could speak, sign, lipread, read or write. It was interesting in that like EDGERTON's retardates each respondent had supportive, entrepreneurial Mums who were present and helped translate. They seemed to have an intuitive knack of getting through to their deaf offspring, a point noted by CONRAD (op.cit)¹². Nevertheless, my questions went through many phases of misunderstanding before some kind of congruence between question and answer emerged. I am, of course, only too aware of the inevitable distortions such reliance on a third party creates. There was, however, simply no alternative available. I doubt if an interpreter could have improved on the exchange.

Finally, and I interviewed them last, were 6 signing respondents. My journey in acquiring passably adequate sign language has been described. It remains only to be noted that hearing signers are rarely taught anything other than signing according to English word order. Subjects were, therefore, obliged to 'switch codes' to communicate with me. The fact that they did so I regard as a compliment.

The strain on my part of using an unaccustomed visual mode of communication was difficult to overcome. Not only did it demand the unaccustomed use of facial and body muscles. After about two hours of concerted effort, my eyes literally ached with fatigue. The limited concentrated visual attention span of the average hearing person often goes unappreciated. From my respondents' point of view, it was a discourtesy to look even momentarily away. PADDEN and MARKOWICZ (1976) note how easily the deaf are discomfited by loss of eye and facial contact. It is equated, not unjustifiably, with lack of interest.

Thus I was specifically asked by Miss M.A. not to look away and take notes - even at intervals. Dialogue had to be remembered and written up the following day, again something which requires practice. Cups of tea,

sandwiches, meals were left untouched. I found it quite impossible simultaneously to sign and eat - not to mention preparing a meal.

An inventiveness on the part of subjects to get concepts across never ceased to amaze me. One respondent was trying to explain a 'fiddle' he had done, something which defied my signing skills. Eventually he drew an imaginary bow across an imaginary cello. Another subject explained about "indentured apprenticeships" with much pantomime with his teeth.

Prior to establishing my own personal signing 'tutor-friends', I had tried interviews alone. They resulted in much frustration and boredom. Respondents had to gear their answers to the level of my receptive skills, truncating and simplifying their signing vocabulary. In fact this is a nice irony: simplification, modification and truncation of response are the typical reactions of hearing people to the hearing impaired. For later interviews, I often had the help of Miss M.A., and, on one occasion, the assistance of parents who had learnt to sign.

All these were difficulties, I would argue, in addition to the normal problems of conducting interviews with people unknown to one, and coming possibly from very different social and educational backgrounds. I have stressed the difficulties merely to demonstrate a point. Overcoming them was exhilarating, exciting and immensely rewarding.

A problem not usually addressed is that of reciprocity. Apart from those respondents who experience genuine pleasure in talking about themselves, what does the researcher give of himself in return for what is privileged access to data? The interview is generally thought of as a fairly one-sided exchange. However, firstly I treated it more as an extended conversation - often over a period of time - and gave of my own experiences where asked for, or where deemed appropriate.

More importantly, what the respondent can rely on is the fact that the information given will not be challenged or criticised (BENNEY and HUGHES, (1977)). For single interviews, this is important in redressing, to some extent,

what might otherwise be an imbalance in the power relationship. However, as I came to know respondents better, I found I could modify this 'pseudo-equality'. It gave way to a more honest equality as the interviews became dialogues.

Above all, most respondents did seem to enjoy the opportunity to talk. Particularly for those experiencing considerable social and occupational isolation, it was suspected that the interviews presented a rare opportunity for human communication.

In addition, in some cases, I was perceived as a 'resource' and my help in trying to deal with Social Security problems enlisted. It may well be that I was also viewed as having a useful role to perform in promoting knowledge about the deaf to the hearing world. It was interesting that my thesis was invariably translated as "a book" by respondents from Groups IV and V, even though I was careful to sign "thesis first, perhaps book later".

The way I feel I was able, in varying degrees, to approximate the 'realities' of my respondents' perceptions was ironically a function of what had been a misjudgement: namely the length of the interview schedule from the insufficiently heeded advice of Mrs. Langford: "If you think it takes an hour, then double or even treble it".

In many cases it necessitated two, if not more, sessions. In other cases the dialogue was so mutually enjoyable that the 'interviews' lasted whole days, and in one case, spanned a whole weekend. And as my later attempts to learn sign were often structured round the interview itself, some 6/7 sessions were spent with signing respondents.

Inevitable impression management apart, what became a lengthy conversation format might well be taken as indicative of both trust, ease, and a degree of candidness on the part of respondents. However 'undesirable', had I not misjudged the length of the interview schedule and the time necessary to talk to the hearing impaired, the quality of the data would have been that much poorer. (It was only later I learnt that the length of my

interviews was by no means unusual amongst the hearing impaired (BECKER, G., op.cit), or, for that matter, with families of impaired children (DARLING, 1979).

My later corroboration (or follow-up) interviews with 7 respondents not only enabled me to check and modify, where appropriate, my earlier inferences. They added further depth to relationships. Some respondents' perceptions had changed quite radically, as will be seen, thus enabling me to avoid the tendency to assume that actions and statements represented stable features of a person. But my approximation to their 'reality', I suggest, can be claimed with that much more confidence.

Finally, the success with which I contend I did approach and grasp the common-sense meanings and experiences of my respondents might be gauged by two further considerations: the fact that some respondents, particularly men, openly cried during the interview, recollecting painful incidents; and the frequency with which I was invited back to their homes. In one case this was to spend Boxing Day with 3 signing respondents. I was also invited to parties, to visit cinemas and pubs, and to spend entire weekends with respondents. In turn, I invited home the respondents with whom I was closest.

I have described the interviewing process at some length. I have good reason to believe that this is what the hearing impaired want hearing people to know (ANDERSSON, 1981).

6. ATTEMPTS AT CLASSIFICATION AND MEASUREMENT: LOOSENING THE 'OBJECTIVIST' GRIP

The problems involved in attempting to gain access to the meanings and perceptions the hearing impaired have of their world have raised some of the many practical and epistemological difficulties of such an interpretive approach. This last section may have the appearance of being somewhat technical and removed from the 'realities' I was at such pains to explore. I include it, however, for three important reasons.

At the time, my ambivalence towards reliance on qualitative data alone

was unresolved. Margaret NORRIS (1981) neatly describes the dilemma in which I was trapped. She notes that sociologists often find quantitative work "unpalatable", yet they are uneasy with the results obtained from interpretative data. As a result, "Despite their stated antipathy they are impressed by evidence presented in quantitative form".

Initially, therefore, an exploration of quantitative measures formed a substantial part of the research process.

The second reason for inclusion of my efforts at measurement is a salutary one. I had paid insufficient heed to RIMMER's (1974) injunction that hearing impairment is such a subjective phenomenon anyway that attempts at quantification can be quite misleading. In the event, my beliefs in the efficacy - if not near-infallibility - of 'scientifically' acquired data underwent a radical transformation, in response to the subjective elements involved in interpreting what purported to be fairly 'hard-nosed' audiometric data. As PAYNE et al. (op.cit) note, even measures which purport to be 'objective' "...depend upon a constant and undocumented process of subjective interpretations and judgements".

The exercise demonstrated in a way which, perhaps, I would have been unable to comprehend fully without actually doing it the limitations of 'scientific' measurements generally. What also became uncomfortably clear were the contradictions involved in trying to translate data from one source of measurement and reconcile it with another. I was, in effect, transcoding; dealing with two incompatible levels of discourse based on quite distinct criteria. Attempts at rapprochement simply strained the data. The problem became one of trying to match categories which relied on quite different inner meaning systems.

The final justification for inclusion of a description of my efforts lies in the recognition that my most successful measure - corroboration interviews - represented precisely a more thorough application of the very approach which, on its own, had occasioned such misgivings at the beginning of the research project.

Classification and measurement became an issue when I was faced with

the difficulties of classifying respondents for the purposes of analysis. Initially it was considered that respondents' own perceptions of their hearing loss along a scale of 'mild, moderate, quite severe, severe, very severe' would serve as a base-line from which to make meaningful distinctions between the groups. There is some support for the view that such percepts fairly accurately reflect a respondent's actual hearing loss (BAUGHN, 1961). However, it was felt at the time that reliance on yet more subjective data inadequately met my quest for reference to 'outside' criteria.

Traditionally, severity of hearing loss has been the criterion used for classification of hearing impairment. At that stage, my attitudes towards the use of medical models were still favourable. It did indeed seem that this particular variable, rather than other clinical, psycho-social or educational variables could best define the population and provide the optimum jumping-off point for a subsequent qualitative approach. It was only later that my evaluation of the value of a clinical model changed.

The University Psychology Department was therefore approached for help in devising equipment whereby I could assess severity of loss by pure-tone air conduction¹³. The use of speech audiometry would have been a better tool for those whose speech was still intact, but, of course, quite useless for those respondents without speech. Moreover, it has yet to be adequately standardised. The method and the necessary modifications which had to be made to my measurements are described in Appendix 8 (iii).

My findings must be regarded with some circumspection for the reasons I have outlined. Tentatively, however, they lent some substance to the findings of HERBST and THOMAS, 1980; BARCHAM and STEPHENS, 1980; and THOMAS and RING, 1981 of the inadequacy of pure-tone audiometry, on its own, to predict functional capacity - although in many clinics this is still the only testing carried out. It may be precisely because of the incongruence in levels of discourse between what is a highly 'scientific' measure and one which, for its use, depends on many social factors and the social context in which the hearing impaired person is operating, that

the above-mentioned authors have failed to reconcile the two. Thus respondents with similar degrees of severity of loss often varied quite dramatically in their ability to achieve smooth interpersonal interaction.

The difficulties of juxtaposing quantitative and qualitative data apart, there were, however, indications that pure-tone testing suggested a worse picture of functional performance than was in fact the case. If this can be further verified, it has important ramifications for the role of audiologist as official labeller¹⁴. References for a medical examination required by a prospective employer may seriously jeopardise an applicant's chances.

And the exercise did highlight a point raised by BENDERLY (op.cit), namely the negative concentration on what a person cannot hear, often at the expense of what he can hear.

Finally, it seemed that those with quite mild clinical loss often felt as disabled in coping with the everyday contingencies of life as those with more severe losses.

However, as a classificatory tool the measurements were quite unsatisfactory, twelve respondents having to be excluded altogether for reasons discussed in the Appendix. Most importantly, it added very little to my understanding of the subject under investigation - the meanings my respondents attributed to hearing loss - simply because I was employing a method of measurement with criteria which bore no relation to their routine understandings and ordering of the world, on which this thesis is predicated.

In addition, other factors contributed to my dissatisfaction with it. In its administration, it added appreciably to the length of the already long interview(s), and in a few cases jeopardised the establishment of a relaxed rapport. For 2 respondents, it caused such distress and nervousness that the test had to be abandoned. Other subjects were bored and paid little attention to the testing, with a corresponding impact on the results. One session I was obliged to do in the kitchen whilst the subject

ducted sporadic signing conversations with a constant stream of friends helping themselves to tea. (This is not a testing situation any self-respecting sociologist would normally permit. At the time, it seemed to be a case of 'now or never', the respondent returning to the States the following week. In the event she was not included in the sample). And for the profoundly prelingually orally deaf, it was sometimes difficult to be absolutely sure whether a positive, negative, or 'not sure' response was being conveyed.

Others, on the other hand, enjoyed it, finding it provided a welcome diversion from the fatigue of lipreading. And some were intensely interested. On several occasions, however, I found myself clothed in an aura of respectable medical professionalism and my clinical advice was sought. This was not a role I was anxious to assume; and any replies were confined to the most basic fundamentals of audiometry with which I was conversant. Nevertheless, this does highlight the need of many respondents to understand in greater detail what was wrong with their hearing, and the struggle to make sense of events at the clinic. A busy audiologist has little time for such a function.

I present my 'audiometric' findings both to demonstrate the limitations of reliance on a clinical model of impairment only, and to show the difficulties inherent in interpreting what purports to be fairly 'hard' data. Absolute precision is an elusive goal. Even had I been appropriately qualified, the interpretation of evidence is still dependent, to some extent, on the subjective judgement of the individual tester. No test can completely allow for the errors which accompany the expectations and pre-suppositions - the boredom or nervousness - different subjects bring to the test situation. I had placed too much reliance on the efficacy of 'scientific' measurement itself. Most of all, I had completely misconceived the nature of the difficulties involved in endeavouring to reconcile the inner logic of what are two totally disparate levels of discourse.

Other measures were therefore tried. These included the use of the Gallaudet Hearing Scale (Appendix 8 (i)) developed by SCHEIN (1968). However the ambiguities in using a scale designed ostensibly for the profoundly deaf soon became apparent when trying to apply it to the more mildly impaired. How was one to score a response, for example, to the question concerning the ability to discriminate between noises when the answer was: "I can tell the difference between the smashing of glass and a child screaming, but not between the sound of lorries, cars and scooters". (Mr. L.M.)

What constituted a "loud noise"? The sonic boom? A woman's scream? What are "other sounds and noises"? No attempt appeared to have been made to standardise distance, volume, pitch of voice, familiarity with speakers. It is not, however, as BIRD and TREVAINS (1978) have argued, that the Scale is making claims to internal logical consistency which it cannot possibly validate. It is simply insufficiently refined to cater for a wide range of hearing loss. It was therefore abandoned.

As my interest lay in assessing perceptions of handicap, I attempted to devise a scale of functional handicap along the lines of those developed by HIGH, FAIRBANKS and ARAM (1964); NOBLE and ATHERLEY (1970); and BIRK- EWERTSON and NIELSEN (1973) (cf. Appendix 8 (ii)). With hindsight I can appreciate both the naivety with which I tried to produce a composite Scale incorporating all the better elements of the above; and the inevitable incongruity of discourse involved once again. Standardising and scaling such an exercise would have warranted a thesis in itself, and I therefore abandoned my attempts. In any event, it would have posed insuperable problems of vocabulary management for those hearing impaired respondents I interviewed later, not to mention the time taken to administer it. As noted with the interview schedule, the understanding of even quite crude gradations is particularly difficult for those linguistically deficient.

Ideally, I should have liked to have asked respondents themselves to indicate areas of difficulty in the particular problem area I was studying: employment, in the hope of building up a profile of hearing handicap congruent with the interpretative thrust of this thesis. I leave this to others.

Ultimately, the problem of classification became a matter for my own subjective judgement. I devised a simple scale of "Ease of Communication with ..", rating respondents along a 5-point Scale of I (Easy) to V (Very Difficult), using hearing norms as referents. That is, it is based on the kinds of expectations and presumptions which the average hearing person might have of an encounter which was not just of a fleeting nature, but was sustained over a couple of hours or more.

The Scale is described in Appendix 9, together with the various checks I carried out post hoc to assess consistency in ranking over time. As an heuristic device, it was the most effective tool I could employ in order to gain access to, and classify, my material. Moreover, it will be noted that respondents' perceptions of the 'functional' severity of their loss (Appendix 9, Table 9a), ie. with the use of a hearing aid where appropriate, correlated fairly well with my assessments.

However, I cannot pretend that it is free from defects. I contend, nevertheless, that errors, where they took place, tended to cancel out, and that ranking of the same subjects by an independent observer would not have differed too radically from my own, even if the overall shift had been upwards or downwards. (cf. Discussion in Appendix)

The most successful and worthwhile endeavour was the use of 'respondent corroboration'. After an interval of some 9-12 months after the initial interviews, I endeavoured to check out some of the inferences I had made by re-interviewing 7 respondents: 1 from Communication Groups I, II and IV, 2 from Groups III and V. I selected them as I adjudged them to be less than typical in their responses. Rather than confining myself to simply producing 'more of the same', I phrased the few topic questions I prepared in a way designed to go 'looking for trouble'.

I understand this is a device not much employed by sociologists (PAYNE et al). Yet, as the authors claim "...it is the stipulation of falsifiers .. /which/ opens up the possibility of debate - new evi-

dence can be produced within the terms set - but also the possibility of conceptual challenge because the terms of reference have been made explicit".

Whilst my claims are more modest, in that 'corroboration' (or 'confirmation') was used largely to modify a tendency to make more categorical inferences that the initial data possibly warranted, rather than adhere strictly to a Popperian model of falsification, I did carefully select the most disconfirmatory cases I had. The result is "a weak form of falsification" (PAYNE et al). But I more than concur with REX (in PAYNE) that it is precisely this capacity of the sociologist to identify areas where modification of his propositions can be sought " ..which gives him the right to claim that his descriptions have greater validity ".

Perhaps, as importantly, it gave me the opportunity to take a selective longitudinal view of my sample and approximate a dynamic rather than a static analysis. As noted, it also added depth and uncovered new layers of meaning I would have been the poorer without.

Viewed with the benefit of some hindsight my attempts at classification and measurement have, paradoxically, enhanced my confidence in the validity and ultimately the reliability of qualitative data on its own. Over the period of research, my ambivalence regarding the desirability of striving for both qualitative and quantitative data underwent a quiet revolution. The method I have adopted for this thesis stems from the inability of a quantitative approach to grasp the complexities of the subject matter under investigation. At best it has provided only the most superficial understanding of the data. Thus, the attempts I have made, although time-consuming, have been relegated to a quite subsidiary role. I have been concerned rather to develop a set of arguments, theoretically as rigorous as any quantification process, which, I contend, have accounted much more effectively for the subject I have been studying.

The most basic methodological issue facing any researcher is the question of the kind of statements he is able to make from the work,

taking all the acknowledged weaknesses, attempts to counteract them, and checks made, into account.

This has been essentially an exploratory study. It was not designed to enable me to establish generalisations about the whole hearing impaired population, but, on the basis of a limited sample, to investigate broad themes of how the hearing impaired perceive a hearing-dominated world of work, and how they attempt to make sense of it. It is, as HEIDER and HEIDER (1941) comment of their much earlier study of the life problems of the deaf, more a "survey of the field": an attempt to understand a particular social process as it affects the interaction between a deviant minority and the wider society, rather than to provide systematic answers to questions. My concern was initially not to make strong statements, but to make statements in an area virtually devoid of any statements at all.

However, the fact that I took on board a quite unanticipated issue: the resistance to a comparative study, has led to a toughening of my original stance. The contribution that sociology has to make has, I think, been well vindicated in the applicability of my alternative perspective, as subsequent chapters will demonstrate.

Nevertheless, the limited nature and unrepresentativeness of my sample means that inferences are strictly applicable only to this group of subgroups, and not to the hearing impaired population as a whole. This does not, I suggest, negate the value of such inferences. They do have wider implications as I shall discuss in Chapter 7. The conclusions I hope to draw must properly be regarded as indications of general themes which lay the foundations for future work.

The basis on which the inferences I have made during the course of this research I have made explicit in much of the foregoing and ensuing discussion: the use of observation, recording and classification; the convergence of various kinds of 'evidence'; the frequency with which certain phenomena recurred; the search for interconnections; the quest for the exis-

tence of questionable but unchecked assumptions.

What I have endeavoured to do in this chapter is to resolve, as far as humanly possible, one half of the problem: that the data is valid in being more or less true. In adhering to BECKER's (1970) recipes for resolving the problems of evidence which reliance on qualitative data inevitably raise, I have followed the injunction of LAZARFELD (in BECKER, 1970) to "... keep the logic of quantitative research methods in mind when analysing qualitative data".

I stress that it is the logic rather than the nature of the enquiry which is at stake. Thus I have dealt at some length, and in some detail, with a precise description of how I entered the research situation, sustained and finally terminated the fieldwork; the problems involved in gathering information and data, and how these affected the outcome.

Reliability is, of course, the ultimate criterion. Every researcher is under the obligation to try and produce reliable work. The extent to which an interpretative sociologist can achieve this is one of maximising probabilities. He may even have an 'edge' over his social survey colleagues: he is uniquely placed to open up channels of discourse with groups in our social system whose way of thinking and behaviour may appear arbitrary and irrational. It is this which creates the conditions for mutual understanding - between both deaf and deaf, and ultimately deaf and hearing people.

As the theoretical assumptions I held prior to collecting the data and during the data gathering process are crucial to the reliability of the inferences I make, I will deal with these in greater depth in the following chapter. This will, I hope, complete the other half of the equation in seeking for "links between findings and broader generalisations" (MANN, 1976), and pave the way towards what is the heart of this thesis: the way the hearing impaired perceive and interpret their world of work, and the routine practices they adopt in interaction with their hearing work colleagues and employers.

NOTES

1. 'Total Communication' was developed by Roy Holcomb at the Maryland School for the Deaf in 1968, as a result of the profound disquiet at the low levels of academic achievement of deaf pupils. DENTON (1976) has defined it as "... a manual, auditory, oral system of communication, recognizing the legitimacy of the language of signs as an essential visual reinforcement to oral and auditory aspects of communication for deaf persons".

However, its application has been less than happy. In many schools throughout the UK. 'T.C.' means no more than oralism supplemented by finger spelling. The development of language competence has often been interpreted by teachers to mean competence in English. "In many cases, this view of 'T.C.' was used to justify or rationalize what teachers had already been doing in their classrooms" (COKELY, 1980)

Properly applied, it is a philosophy rather than a method, and, as such, depends for its success on the attitudes of teachers. It does not specify any particular manual system (MITCHELL, '81). It is "the right of a deaf child to use all forms of communication available to develop language competence". Its potential implications are truly staggering. It is conceivable that the stigma attached to sign language as an archaic and devalued 'animal language' will eventually disappear, and with it, more positive attitudes towards the hearing impaired emerge. Ultimately it may mean the disappearance of that group of profoundly prelingually orally deaf who are functionally illiterate, and have no means of communication other than gesture and home-made sign.

Despite fears concerning the possible adulteration of sign language and hostility to integration on the part of some signing deaf people, T.C. does provide a means whereby fluency in English - and thus some economic independence - can be acquired, at the same time as preserving the richness of BSL, and the community which is based on it.

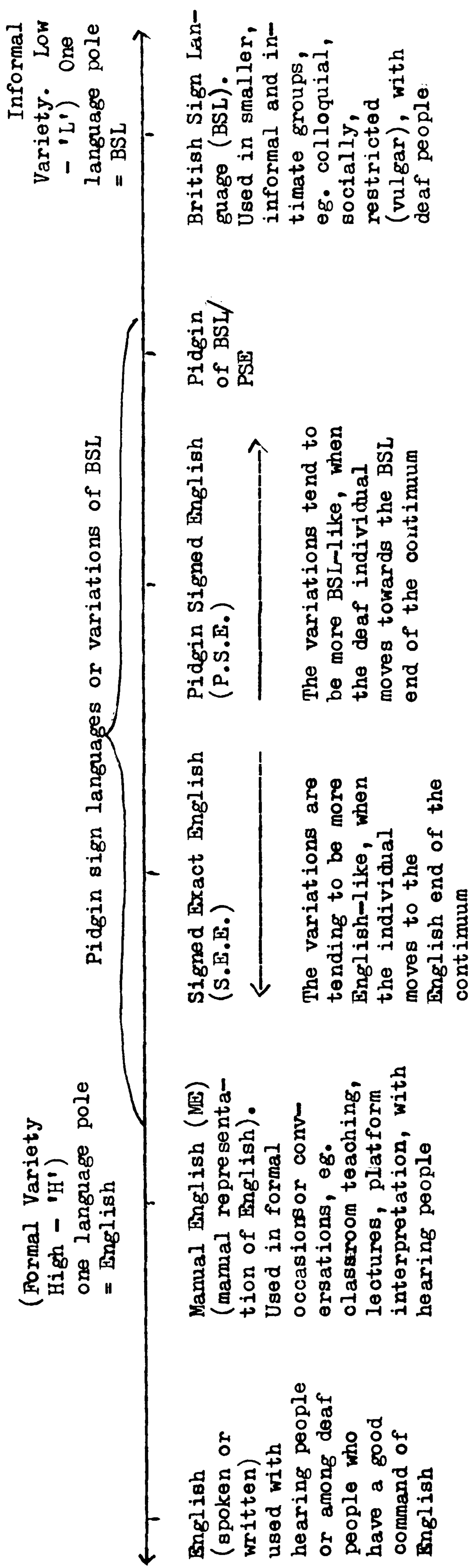
2. British Sign Language has been variously described, most eloquently perhaps, by BELLUGI (1976): "It is a language with a grammar specifically suited for vision ... for the eye rather than the ear, but capable of wit, drama and poetry and very fine nuances of expression". In common with spoken languages, it is governed by a system of rules, it is arbitrary, and has a grammatical structure which is precise, complex and highly articulated.

3. Sign language has been regarded as forming a "bi-lingual-diglossic continuum" between BSL 'proper' and English (LAWSON, L, 1980). The diagram (over) will illustrate the spectrum. Signing Exact English (S.E.E.) is a word-for-word representation of what is being said. The variations near each end of the spectrum are what are known as 'pidgin' languages, "... reduced in morphological structure, contain/ing/ a partial mixture of structures of two languages (BSL and English), and contain/ing/ structure common to neither of these languages in the communication system" (LAWSON, op.cit).

They are not 'native' languages. Pidgin sign tends to be used only in fairly restricted social circumstances to help the communication process rather than to function as a non-verbal form of expression.

The use of the concept of diglossia as a means of conceptualising these distinctions (DEUCHAR, 1978; WOODWARD, 1980) has now fallen into some disrepute, as conferring inferior status on BSL proper. PADDEN and MARKOWICZ (1976) have suggested reference might more usefully be made to

THE BILINGUAL-DIGLOSSIC CONTINUUM BETWEEN BRITISH SIGN LANGUAGE AND ENGLISH WITH VARIATIONS



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the concept of "language varieties"within ASL (and BSL), with rules governing the use of varieties in particular social situations. 'High' and 'low' forms have been found within BSL itself (WOLL, 1982).

4. Fingerspelling presupposes a fairly thorough acquaintance with 'standard' written English. Very few signing deaf use it with any fluency, other than those versed in S.E.E. as well as B.S.L. Nothing better illustrates the distinction between BSL and 'signing' according to English word order.

5. Various attempts have been made to produce a notation (as opposed to a written) system of sign. SUTTON's "Signwriting" is the nearest equivalent (WOLL, 1982). At the time of writing, a "Sign Dictionary" is being prepared by the British Deaf Association.

6. Makaton is a vocabulary rather than a language system and has been described as a "degenerate form of BSL" (KIERNAN, 1982). It has no syntactical rules. Signs are selected from BSL. It has been fairly successfully applied to teaching the mentally retarded, and its use in the treatment of adults whose speech function is paralysed by strokes is being explored. The revised version, which was taught, is intended "to increase its size and scope" (WALKER, 1978). Key words only are signed, and it is accompanied by grammatical speech. Its relevance to the profoundly pre-lingually deaf as a first language is, therefore, marginal.

7. The stress on iconicity has, perhaps, been over-stated (KYLE and WOLL, 1980). Mime can be reduced to lexical items. If Sign was purely iconic, hearing people would be able to learn it with a great deal more facility than they do. BATTISON (1980) notes that as Sign has developed, it has become less, not more iconic: "signs .. have become more like a standardised gesture that must be pronounced in a particular way to be 'just right'".

WOLL (1982) now argues for a continuum of iconicity and arbitrariness.

8. It was with a profound sense of relief that I read BENDERLY's description of the difficulties hearing people experience in learning sign. She quotes the experience of a teaching programme by Maryland School for the Deaf:

"...only half the mothers could sign sentences after six months of studying with a teacher who visited once a week. Forty percent had some usable individual signs, and 10 percent had no usable signs whatsoever ... Only half of the fathers knew any signs, a quarter managing sentences and a quarter using only individual words".

Not only is it a mistaken assumption that learning to sign is easy.

BENDERLY continues: "Having to learn sign robs a hearing person, particularly an adult, of his sense of social competence even more profoundly than immersion in a spoken foreign language".

9. The idea of a 'pecking order' in the deaf world relating to the ability, or lack of it, to sign was corroborated by Miss M.A. and Miss R.C. Interestingly, it was something denied by MILES (1983). Commenting in a private capacity, rather than as a member of the BDA staff, she wrote:

"With regard to the oral deaf person, there are actually many of them within the deaf community ... If they socialise with other deaf persons, then they are considered to be part of the signing community whether they sign fluently or not".

None of the orally deaf respondents I talked with who attended Deaf Clubs felt comfortable or accepted there.

Moreover, it seems that the attitudes of the signing deaf towards their less fortunate orally deaf colleagues with no vehicle of communication - whose situation the new militancy is, presumably, designed to alleviate - are characterised by a certain obliviousness. Witness the astonishment with which Ms. ALLSOP (ALLSOP and KYLE, 1982), herself a well-established member of the deaf community, reacted to the presence of this group in her sample. "I was amazed at their inability to communicate", she comments. The signing deaf, it seems, have always regarded themselves 'at the bottom of the pile' (MILES, op.cit), stigmatised by the orally postlingually deaf.

10. FINNEY (1977), for example, at pains to dissociate herself from the possibilities of comparison, then engages in a volte face: she concludes that despite the lack of derogatory historical references to the 'hard of hearing', "...one cannot help but feel that there is some correlation in people's images of hearing disability which will lead them to generalize".

11. Lipreading bristles with difficulties. First, it presupposes a thorough knowledge of language: it is a code for the reception of already known language. The acquisition of new vocabulary via lipreading is thus highly problematic. Its usefulness is restricted largely to those with acquired loss.

It is also highly ambiguous. Some sounds are virtually undetectable: a hard 'c' formed at the back of the throat); or are so similar as to cause confusion, eg., 'b', 'p'; 'm', 'n'; 't' and 'd'. Particular words on the lips look alike (homophenes) : 'forty' and 'fourteen'; 'judge' and 'church'; 'amuse' and 'abuse'. Finally, actual phrases blend: "Which do you want?" becomes "Which dj'er want?"

Other problems reflect the strain of having to perform two functions simultaneously: that of filling in the gaps and preparing an appropriate reply - something a hearing person does almost automatically. Also 'affect' has to be identified. "... one actually focusses one's attention on a speaker's eyes rather than his mouth, reading below the lines, as it were, the verbal enunciation of his mood" (WRIGHT, 1969). Rather, it is necessary to constantly flick between eyes and mouth, auditory perception lagging in the process. And the problems of lipreading pipe-smokers, pen-suckers, and the hirsute are legion.

12. CONRAD (1979) comments: "Commonly the speech of deaf people may be totally unintelligible to strangers and yet reasonably intelligible to their immediate family. The pre-requisite is consistency. In the same way that we learn to re-code, ie., translate, foreign words, so too can the parents of deaf children learn to translate their utterances".

13. Sounds are audible via two routes: (i) they can travel in the air, through the external ear, ear drums and to the cochlear. This is known as air conduction hearing, and is the most important route. (ii) Sound energy can enter the bones of the skull and thence directly to the cochlear (bone conduction hearing). Early observers using a tuning-fork found that with sensori-neural deafness "air conduction and bone conduction are more or less equal"; whilst those with conductive deafness "air conduction hearing is reduced but bone conduction hearing remains near normal and is sometimes even better than normal" (NAUNTON, 1968).

The point is that "Transmission is not so efficient across the skin and through the bone as it is by the normal route" (DAVIS and SILVERMAN, 1978) ... "It is air conduction that gives the ear its greater sensitivity, particularly for the higher audible frequencies".

It is the loss of higher frequencies, characteristic of sensori-neural deafness which causes problems in speech discrimination. Consonants, especially sibilants and fricatives, are located at these frequencies and give intelligibility to speech. Vowels are located at the lower frequencies. Whilst they give power and energy to sound, they are meaningless on their own. Although clinics now do both air and bone conduction testing as a matter of routine for diagnostic purposes, air conduction testing is the most important indicator of difficulties with speech - and hence communication generally.

14. It is possible that audiological and allied professionals might be regarded as official labellers in a more subtle manner than simply that of legitimators of a clinical diagnosis. Ignorant of the many varieties of signing, and of what constitutes BSL (as I was informed by one delegate at the British Society of Audiology Conference, January 1983), they are in a unique position to exert pressure on anxious parents to forego their children learning sign or using T.C. Their frame of reference is firmly hearing.

CHAPTER 3: LABELLING THE HEARING IMPAIRED

In this chapter I will present an explanatory theoretical framework with which to illustrate my arguments. Whilst I have drawn broadly both from ethnomethodological and, to a lesser extent, phenomenological schools of thought, my perspective is firmly located within that most controversial off-shoot of interactionism, labelling theory.

This in no way commits me to espousing labelling theory in its entirety, or to viewing it as an exclusive panacea for explication. To expect a theory to have total explanatory power is quite misconceived. Its gaps and omissions will become apparent in the course of the analysis (DAVIS, N., 1972; GIBBS, 1972; GOVE, 1975; WEST, 1979). However, all theories have their strengths. Rarely do they suffer from all the drawbacks their critics would urge upon us. The attractiveness of the labelling perspective stems precisely from its "sensitising" as opposed to its "denotative" qualities, which allow the reader an entrée to new ways of perceiving assumptions. In SCHEFF's (1974) words, it "... attempts to jostle the imagination, to create a crisis of consciousness which will lead to new visions of reality".

I have adopted some working concepts derived from that approach as providing me with the most fruitful tools for analysis. Such an approach is geared precisely to maximising the strengths of the labelling perspective.

I thus make no apology for the apparent eclecticism: no empirical researcher uses a theory, or theoretical perspective, in its entirety.

As PAYNE et al (op.cit) note: "... the researcher in the field does not actually use wholesale theories, but borrows eclectically, polishing a concept or appropriating bits and pieces rather than complete schemas", choosing "... only those parts which can be adapted for use in knowing the external world".

The tradition of regarding eclecticism as something of a 'dirty word' is, I suggest, equally misconceived.

I have been principally concerned to extend GOFFMAN's micro-analysis of encounters in largely limited, casual social situations to a study of the labelling processes in a situation where interaction has to be sustained: that of employment. Goffman's work has largely been geared to

"episodic or repeated interactions, rather than to sustained interplay" (GLASER and STRAUSS, 1964)

(although his study of life in a total institution (1961) is a magnificent exception). Whilst many of the issues are similar, it was hypothesised that the ramifications might be rather different for interactants who are obliged to sustain 8-hour daily relationships in a situation which stands, perhaps, mid-way between these two extremes. I hope, thus, to have added a small, but significant dimension, to interactionist studies.

My emphasis has centred chiefly on the relatively neglected field of informal labelling. Most labelling research has focussed on social control processing, to the neglect of "...the more ephemeral forms of misconduct which surround us" (DENZIN, 1970).

I suggest that informal sanctioning is just as pernicious and insidious as what GARFINKEL (1956) has termed "official degradation ceremonies".

Paradoxically, as SUCHAR (1978) notes: "These less structured degradation ceremonies are often effective because the denouncers are the status equals of the denounced. The status degradation by peers and by those who were formerly friendly associates of the alleged non-conformist can be extremely significant in altering self-regarding attitudes".

Inevitably, however, official definitions have obtruded in my analysis. The task, ultimately, became one of identifying the intricate and complex interrelationships between the two, as critical to a proper understanding of the process (EMERSON and MESSINGER, 1977). It is simply a moot point which is the more harmful. Suffice to note that 'problems' tend to be identified initially by the private informal definitional process.

Similarly, sanctioning does not take place in a social vacuum. Employment, as a social structure, has also impinged on the analysis,

thus demonstrating the complex relationship between interactionism and structuralism, rather than polarising them into discrete compartments.

Generally, this thesis is an exploration of a particular and partial view of how the social manifestations between hearing and hearing impaired operate at the micro-level, within a particular social context critical to economic survival.

The main working concepts I shall use in an attempt to illustrate the plight of those disadvantaged by a communication deficiency I owe principally to the works of GOFFMAN and SCHUR. I am drawn to the former because of his ever-readiness to draw out similarities in apparently different types of behaviour; and I am indebted to the latter for an appreciation of the essentially dynamic and innovative nature of the deviance defining - and reacting - process. They are as follows:-

1. Stigma, and two sub-concepts: the distinction between discreditable and discredited victims; and between felt and enacted stigma;
2. Stereotyping;
3. Strategy management;
4. Deviant outcomes both as "definitions of the situation" and as a "concrete state of affairs" (SCHUR, 1979).

I intend to look at the complex interaction between all these processes, although for ease of analysis they may become separated.

1. DEVIANCE AND HEARING IMPAIRMENT: THE DEFINITIONS OF OTHERS AND THE POWER TO DEFILE

Much of the literature on the relationship between deviance and physical impairment has demonstrated how impairment generally tends to be negatively categorised for transgressing what are the fundamental norms of appearance, curability, health, financial independence and self-reliance, and, critically for my argument, smoothness of interpersonal interaction (FRIEDSON, 1965; WALSH, 1969; SAFILIOS-ROTHSCHILD, 1970; HILBOURNE, 1973). More particularly, defects of the face and mouth -

and any accompanying infractions of speech delivery - tend to be subject to disproportionately severe sanctions in our society (ARGYLE and KENDON, 1967; ZAHN, 1973). WALSH argues convincingly that facial disfigurements are more likely to elicit penalties than a visible handicap anywhere else on the body. Facial and speech deficiencies disrupt interaction, and this appears to pose a profound threat to our taken-for-granted assumptions about the world.

In his last book (1981) GOFFMAN elaborates on this theme: he argues cogently that it is deficiencies in what he calls the "basic competencies" - dress, appearance, and, critically, speech performance - which call forth some of the most negative evaluations in our society. He comments:

"Competency in regard to common-human abilities is something we tacitly allot to all adults we meet with, an achievement and qualification they are taken to start with, credit for which they receive in advance. We have a folk notion that speech production will ordinarily be faultless, occurring without a hitch. An individual's failure to sustain these 'normal' standards is thus taken as evidence not only that he doesn't (or might not) measure up in these respects, but also that as a claimant he has tacitly presented himself in a false light. With reappraisal goes discrediting and an imputation of bad faith".

Deviantising occurs when the hearing impaired are perceived to depart from such 'acceptable' standards of communicative competence. It tends to take the following forms:-

(a) Stigma

Stigma is defined by the Oxford English Dictionary (1933) as "A mark made upon the skin by burning with a hot iron ... as a token of infamy or subjection; a brand; a mark of disgrace or infamy; a sign of severe censure or condemnation".

Such a definition is indicative of near-pariah status for its holder. It is important to note, however, that not all impaired people are necessarily stigmatised, and that stigma is not universally felt (OLIVER, 1979; RYAN, KEMPNER and EMLÉN, 1980). It is incorporated in varying degrees, depending upon a whole battery of factors, chief of which, I suggest, is the ability to deflect such imputations of deviance by the negotiation of bargains more favourable to self-image. Hence the notion of degrees

of deviantness. Deviance is not an all-or-nothing affair.

Despite the variability of stigma, sufficient of my hearing impaired sample felt they were potentially or actually stigmatised to warrant use of this concept. The distinction between felt stigma - the internalisation of feelings of shame and the belief that others hold these attitudes - and enacted stigma - actual discrimination - has been a useful one.

Pivotal to my own analysis, however, has been Goffman's distinction between discreditable and discredited individuals. I have used this to make a fairly arbitrary division between those hearing impaired whose communication skills are such as to preserve reasonable smoothness of interaction, and for whom strategies of passing or at least normalisation are feasible options; and respondents whose impairment is immediately evident, if not obtrusive on encounter, so that passing and normalisation cease to be viable options. Such a distinction allows for variability between situations. A respondent discredited in one situation may well join the ranks of the discreditable in others. Moreover, it is a distinction readily linked to my assessment of respondents along the "Ease of Communication with .." Scale.

The management of biographical information and tension control are also useful concepts. For discreditable respondents to pass, avoidance of disclosure of attendance at special schools or Partially Hearing Units, acquaintance with known deaf colleagues, must be strictly monitored. Whilst this is of less importance to discredited respondents, I suggest that, contrary to GOFFMAN's contention, tension management is applicable to both groups, being an integral feature of the control of biographical information as well as to the presentation of a 'front'.

Not only is stigma incorporated variably; it comes in differing shapes and guises. There are numerous forms of stigma reactions with which I will be concerned. Depending on who is being defined and the nature of the behaviour or condition, deviantising can range from mild dis-

approval to ridicule, avoidance, isolation and segregation, to the denial of various social and economic opportunities. Basically, however, all stigma reactions have the same purpose and common property: to shame and discredit those who, in one way or another, threaten majority values.

Whilst at first sight these various kinds of reaction might not seem to be entirely compatible, I contend they maintain an inner logic. Certain common elements emerge which make stigmatising qualitatively - although not necessarily quantitatively - similar: the basic properties differ only in degree, not in kind.

If one bears in mind the notion of stigma as a form of "containment" as suggested by SCHUR (1980), then a broader model ranging from socio-psychological and moral containment, to interpersonal, economic, and ultimately geographical and physical containment, may have a better conceptual 'fit'. All deviance defining, however, involves socio-psychological and interpersonal containment. The additional dimension with which I shall principally be concerned here is economic. For the purposes of this discussion, however, I shall generally refer to stigma reactions. Thus I shall be concerned with a continuum of response: from awkwardness and unease, to mockery and ridicule, to segregation and denial of access to economic opportunities.

For Goffman, the central dilemma of the stigmatised individual's situation in life centred round the rather loosely delineated problem of "acceptance". "Those who have dealings with him fail to accord him the respect and regard which the uncontaminated aspects of his social identity have led them to anticipate extending, and have led him to anticipate receiving; he echoes this denial by finding that some of his own attributes warrant it" (1968)

It is precisely such lack of acceptance, subtle or not so subtle avoidance, irritation and impatience, if not outright ridicule and ostracism, which characterise the situation of many hearing impaired at work.

I have found the concept of stigma a useful vantage point from which to investigate the following 'discrepancies' which hearing impairment, as

a disorder of communication, poses to ease of interaction:

- (i) Hearing aids as stigma symbols;
- (ii) The violation of socially approved norms of eye contact and acceptable distance between actors which lipreading necessitates; and the irritation engendered by requests for repeats;
- (iii) The negative evaluations attached to discordant, bizarre, or minimal speech, and ^{to} the 'deafisms' which sometimes accompany this;
- (iv) Sign Language as a visible indicator of shameful status.

(i) Hearing Aids as Stigma Symbols

If defects of the face and mouth pose a threat to the normal assumptions concerning smoothness of interaction, so does the wearing of a prosthesis which indicates the nature (but not the severity) of the defect. The perception of hearing aids as stigmatising was confirmed by respondents in my sample who often took elaborate steps to conceal them.

The old body-worn Medresco box aid is universally detested. As

EWING (in GREGORY, 1964) commented: "When a collection of hearing aids is spread upon a laboratory table, it would be hard to find anywhere an uglier, more cumbersome and more inconvenient set of articles for daily personal use".

The introduction of Behind-the-Ear aids on the National Health Service in 1973 has represented a cosmetic improvement. But I suggest it is more than aesthetics which are at stake.

Whilst the wearing of glasses is now perfectly acceptable - although at one time this was not so, schoolchildren being derogatorily referred to as 'Four Eyes' - the wearing of a hearing aid is not. Moreover, it is significant that a flourishing industry devoted to making spectacles sexually appealing has not been extended to hearing aids.

I suggest that hearing aids set up visual associations of lack of body wholeness. Although I disagree with his psychoanalytic stance, ROUSSEY (1971) argues convincingly in this instance in favour of such an

/explan-

ation: "... no matter how elegantly it is concealed .. it cannot deceive the outside world that an appliance is needed in order to make the individual whole".

To regard a hearing aid as a stigma symbol bears out the contentions of most recent authors on the subject (BIRD and TREVAINS, 1978; BECKER, G., 1980; BEATTIE, 1981; and WEINBERGER and RADELET, 1982). How it acquired such status is, perhaps, bound up with the way hearing impairment has been equated historically with dumbness and stupidity - and still is. It is a stupidity symbol¹.

(ii) The Lipreader as 'faulty interactant'

Whilst a hearing aid may obtrude upon an encounter, other norms are also unwittingly breached by those hearing impaired whose expressive speech might remain unimpaired but whose receptive skills are such as to render lipreading an essential supplement to understanding conversation. The practical difficulties of lipreading have already been referred to. Nevertheless, the ability to use this tool is often a vital factor in determining discreditable rather than discredited status.

The norms regarding aural and visual attention are particularly fraught for the hearing impaired. Note has already been made of the distress many deaf people feel at any break in eye and facial contact, which is perceived as signifying lack of interest. On the other hand 'over-attention' is equally disconcerting. The necessity of maintaining fixed, unremitting attention on the other participant's mouth, and sustaining a particular physical/spatial orientation to him, requires intense concentration and skilful management. Generally, encounters are not geared to bear the weight of such intensity.

It has been argued that in concentrating on thinking what one says, a hearing person will let his gaze wander inadvertently round the room, as if in search of inspiration. A hearing impaired person cannot afford

such a luxury. In his endeavours not to lose contact with a person's lip movements, bodily posture becomes strained, tense. The response is often withdrawal. The physical space then has to be made good again, resulting in what WRIGHT humorously describes as "a kind of slow tango".(1969)

However, the strain of performing two functions simultaneously, that of visually decoding language and preparing an appropriate reply, has the unfortunate by-product of depriving the hearing impaired person of valuable non-verbal cues as to what is going on. Disharmony is, as SCHIFF and THAYER (1974) point out, often the result of a hearing impaired person's loss of visible social information. "He has little time to assess how a message is being said, or what others in the group are communicating regarding their reactions to the speaker. Important 'back-channel communication' .. is peripherally selected out of the communication stream".

The authors conclude that deprived of non-verbal feedback and impoverished social information "...it is almost inevitable that discrepant social perceptions and misunderstandings occur",

an argument further developed by OUELLETTE (1982). And misunderstandings generally alienate - and are stigmatised. The encounter is terminated. And the hearing impaired are transformed into 'faulty interactants'.

The virtual impossibility of trying to lipread in other than a one-to-one situation and participate in group discussions means the hearing impaired are barred from the stream of daily contacts. The difficulty is reinforced by a reluctance of hearing others to 'fill in' - itself indicative of the stigmatising evaluations which hearing impairment attracts. Often attempts to participate lead to bizarre situations. One is so graphically and humourously described by John KITTO (1848) that I refer the reader to the Notes section where I have quoted the passage in full². The tolerance he evoked from his audience, however, is in no way typical of the experience of many hearing impaired people, as I shall show.

Thus the inevitable mistakes with lipreading often leave huge gaps in a hearing impaired person's understanding of the world. The need to keep

abreast with hearing information often provokes the classic dilemma: of risking disruption and eliciting annoyance and exasperation with a request for repeats, or being caught out with a question and responding with an inappropriate 'gaffe'. It is a zero-sum situation: irritation, disrupted interaction - and consequent stigma reactions being the almost inevitable result.

(iii) 'Incompetent' Speech

As indicated in Chapter 1, the primacy with which effective speech and language performance is held in Western society cannot be too strongly emphasised. It is the hearing person's referential 'peg' for understanding social competency. "How one speaks is the medium par excellence of the impression one gives. Not only is mastery of correct grammar important for cognitive style, but it is also essential for personhood itself ... what comes out of the mouth may indeed defile ." (my italics.) (NASH and NASH, 1981).

As suggested, the deficiency, or lack of, such communicative skills crucially jeopardises interpersonal relationships, and is heavily penalised. As GOFFMAN (1968) noted: "... a participant with a speech impediment .. can hardly open his mouth without destroying any unconcern that may have arisen ... and he will continue to produce uneasiness each time thereafter that he speaks. The very mechanics of spoken encounters constantly redirect attention to the defect".

I argued in Chapter 1 that the very evidentness of defective communication skills has been obscured and mystified by an over-concentration on the apparent non-visibility of the handicap - the prerogative of only the most mildly handicapped. The slightest speech impairment, as CONRAD (op. cit) notes, is immediately noticeable. "Conceptually we pass instantly from good to defective speech".

The strong negative evaluations attached to speech deviations have been noted by many writers on deafness (MEADOW and NEMON, 1976; HIGGINS, 1980; SEIDEL, 1982, to mention but a few). MINDEL and VERNON (1971)

argue succinctly: "Our capacity to communicate meaningfully with others is inextricably tied to our capacity for survival. A diminished capacity renders one compromised; a non-existent capacity renders one impotent".

The notion of a continuum of competence is actually implicit here, although

its implications have not been followed through. It is in respect of speech intelligibility that most evaluative judgements of the hearing impaired are made and discreditable or discredited status imputed. I have simply extended the continuum to include a range of the hearing impaired population with which the above authors did not deal. The polar extremes thus range from near 'normal' to totally 'abnormal' performance.

Applying the discreditable/discredited distinction, a range of 'incompetencies' which variously violate the norms of interaction characterises the broad spectrum of the hearing impaired population. These are by no means disparities confined to the profoundly prelingually deaf, but may also occur in those with acquired deafness. They include: the omission of sibilants and fricatives; the mispronunciation of some words; the inability to pitch one's voice appropriately, thus 'broadcasting' in a small space or whispering in a large one; abnormal rhythm; atonality; and "excessive nasality" (PRINCE, 1967) of vowels and consonants; discordant intonation; and syntactical error; to the visibility of sign language itself, and the glaring void posed by those with no acceptable vehicle of communication at all, other than natural gesture and home-made sign.

Other difficulties relate to the disconcerting literalness with which a hearing impaired person who has had to learn language uses the vocabulary he has so painstakingly acquired. In the same way, a blind person's writing has a curiously stilted and trite quality. Subtle nuances and the interplay of meanings are lost to the deaf. Again, this alienates, isolates and is stigmatised.

Attempts at speech by the discredited hearing impaired are often accompanied by what are known colloqually as 'deafisms' - tongue clicking, grunting, facial grimaces. Again, these have a similarly destructive impact on encounters, analagous to the 'blindisms' - the hunched posture, the vacant stare - described by GOWMAN (1956).

Total absence of intelligible speech generally meets with total rejection. This is mostly the experience of those orally profoundly pre-lingually deaf respondents. I have already suggested that this group of the hearing impaired is the most stigmatised, disadvantaged, devalued and neglected group of all. Ironically they are stigmatised too in that very deaf culture which places a premium on manual language.

Thus, as LEMERT (1951) commented of stutterers over 30 years ago:

"The stutterer is not only faced with an unpleasant version of himself as an incompetent adult, but also with the direct judgements which are made of his person through the social evaluation of his speech".

His attempts to communicate elicit notions of him being a "... ridiculous and weak-willed person".

So it is with the speech (and to a lesser extent the written language) performance of the hearing impaired.

(iv) Sign Language

Given the historical background against which sign language has struggled to develop and survive, it is perhaps not surprising that it is a highly stigmatised mode of communication. It immediately ensures its users discredited status. Much as its modern users would promote its recognition, the demand, for example, that employers and hearing colleagues should learn sign regrettably falls on deaf ears. Employers are no more likely to learn sign than they are to learn Urdu or Punjabi - and for much the same reasons.

REYNOLDS (1978) quotes a list of the most common pejorative adjectives applied to sign language which have been compiled by MARY BRENNAN*. They include such epithets as "illogical, ungrammatical, unsystematic, primitive, de-humanising, inadequate, non-linguistic".

It has often been referred to as an 'animal language'³, or been dismissed as not constituting a language at all, in the same way that Black English has suffered. A delegate at the 1980 BSL Conference referred to it as:
"A fossil with absolutely no connection with English"

* Head of the Moray House Sign Language Research Project, Edinburgh

Many comments on the stigma sign arouses amongst the dominant hearing majority have been made. Suffice to mention a few: Over 100 years ago, BALLIN (18—) wrote " So deep-rooted is the prejudice against the sign language among some classes, that it approaches a form of persecution ".

More contemporary references indicate the position has hardly changed.

BECKER (1980), in her study of the elderly deaf notes that "Sign language is the visible indicator of stigma for the deaf individual".

The provocative HORIZON (1981) programme commented on the fear prevalent amongst parents that in allowing their deaf children to sign, "It brands them as dumb in more senses than one".

Attempts have been made to explain this in terms of a general suspicion and distrust, particularly by Anglo-Saxons, of 'body-language' (GORMAN, 1960; SCHIFF and THAYER, op.cit;). MEADOW and NEMON (op.cit)

argue, for example: "Like minority groups from Latin America or Southern Europe, deaf persons are regarded with some measure of suspicion and distaste when they use their hands, faces and bodies freely".

To my knowledge, no research has yet demonstrated whether sign language in, for example Italy, is more acceptable than in Scandinavia. However, it is not an implausible hypothesis.

I would, however, suggest that a more general distrust of gesture operates. Gestures might be perfectly acceptable as a means of conveying expression. They are not expected to carry cognitive content.

Credence is given to this by a study carried out by PADDEN and MARKOWICZ (1976), who investigated the experiences of non-signing deaf students at Gallaudet. Not only did their subjects experience acute discomfiture, but many misinterpretations arose from the use of facial expressions and body movements by the signing deaf. These were variously described as " exaggerated ", or " attention-drawing ". If this is the experience of the orally deaf, how much more pertinent it is to the hearing population.

However, I suggest this is insufficient to explain the derogatory

nature of much of the reaction to sign. More attention needs to be paid to the behavioural expectations of the hearing, and the function of language as a mechanism of social control. SOTOMAYOR (1977) draws attention to the functions of language in preserving status relationships:
"Status is often expressed linguistically .. /from/ deference, cordiality, reverence .. /to/ dominance, oppression".

To appreciate the status relationships of a visual/spatial mode of communication requires a symbolic shift - a downward one, it is alleged.

A further possible explanation may reflect just such a fear, that signing is a regressive step associated with the gestures of babyhood (witness the frequency with which deaf signers are subjected to 'baby-talk').

MINDEL and VERNON (op.cit) speculate that "..gestural communication is so intertwined with early infantile experience .. /that/ the individual makes an unconscious association between primitive body language (gesture) and primitive behaviour".

The development and use of speech is thus seen as the development of self-control over early uncontrolled body movements. This is an engaging thought and one which may well have some substance to it.

Another consideration is the inevitable incongruence between a signer's frame of reference for understanding meaning structures, and that of a hearing person using speech. As NASH and NASH argue (1978):
".. spoken English does not mean the same thing for the purposes of social interaction to the deaf that it means for the hearing user".

The deaf gain intersubjectivity from other signers, not from hearing people. The implications are not, however, quite followed through: incongruity, dissonance will be stigmatised by the dominant majority reliant on 'conventional' speech modes.

Furthermore, signing is highly visible. Its users are immediately marked out as being 'odd', or 'different'. Because the idea of a visual/spatial language is generally incomprehensible to the lay hearing public, it threatens our linear, temporal, verbal mode of communication. Above all sign calls into question all our folk notions and assumptions about the nature of ordinary interaction. Departures from this tend to en-

sure relegation to discredited status.

Thus I contend the application of GOFFMAN's analysis of stigma to the position of the hearing impaired succeeds in linking together the idea of a continuum of communicative competence - as evidenced by varying degrees of skill in speech performance - with notions of discreditable/discredited status.

Further, I contend there is a strong tendency for stigma to affect most hearing impaired subjects. The same kinds of imputations of deviance, revolving around greater or lesser departures from expected communicative performance, are perceived to be made of the postlingually (generally orally communicating), as they are of the prelingually (orally and manually communicating) deafened. Such perceptions, of course, vary with the length of time a person has been exposed to such imputations, their severity, and the personal and collective ability to negotiate more favourable definitions of self. This latter, in turn, is critically dependent on communicative competence, as I shall demonstrate.

Finally the relativity of deviance is crucial here. There are degrees of deviantness. It is grossly misleading to regard the hearing impaired as either deviant or not deviant, and, in consequence, either stigmatised or not. As indicated earlier, the social consequences of being deviantised can most usefully be regarded as forming a continuum of stigmatising responses - varying in degree rather than in kind.

In reviewing some of the areas critical to the way society evaluates communicative competence, I have been greatly indebted to Goffman. It is to him I owe an understanding of the mechanisms which often operate to tarnish the image and status of the hearing impaired.

(b) Stereotyping - 'Deaf, Dumb, and Daft'

There are many definitions of the process of stereotyping, but perhaps that of MERCER (1973) demonstrates my arguments as well as any :

"We select from an assortment of characteristics of varied individuals those characteristics which individuals have in common. Then we use them as the basis for developing a mental construct while ignoring differences between individuals ... the definer then treats all those he has placed in the same mental category as identical in every respect".

Whilst stereotypes are not all negative, or inaccurate, and do not necessarily always lead to prejudice (SIMMONS, 1965; MACKIE, 1973; WEST, 1979), I am concerned with those that do. The functional aspect of negative stereotyping, however, tends to be overlooked. Stereotypes order our expectations, help predict behaviour (and our own reactions to it) and simplify an otherwise overwhelmingly complex environment. They are securely grounded in our common-sense stock of knowledge. Thus information which is familiar, which can easily be related to other information regarding our stock of social knowledge, and is consistent with our beliefs, values and attitudes, is likely to be retained. Information which is at variance with these tends to be rejected. Thus, as NASH and NASH (1981) note: "...whenever attention is drawn to a person because of an unusual behavior, one may make sense out of the extraordinary by regarding it as an instance of what everyone knows - that is, by using typical understandings available generally in the culture".

Hence the tenacity with which some stereotypes tend to be held even in the face of contradictory evidence (CUMMING and CUMMING, 1957; FARINA and RING, 1965; SCHEFF, 1966; BOGDAN and BIKLEN, 1977; HASTORF et al., 1980). DAVIS (1963) suggests such tenacity occurs particularly in the case at issue here, that of impairment, which, he argues, involves

"high ego-salience, that is, in which a person has a deep emotional investment and about which strong social stereotypes that inhibit facile acceptance of new attitudes exist".

Moreover, it would seem that our common-sense knowledge is geared to the worst end of the polarity. Hence as WEST (1979) found in his study of epileptics, lay perceptions tend to be located at the worst end of the seizure spectrum. For the hearing impaired, I suggest they are similarly located at the 'deaf and dumb', 'Helen Keller' end of the spectrum, but for a different reason: under, rather than over-exposure⁴.

Even if contrary evidence is sustained over a period of time, there is also empirical evidence to suggest that stereotypes are still not modified, (FARINA and RING, op. cit; KLECK, 1969). This has important implications for the hearing impaired in employment. FARINA and RING argue: "Distortions in perceptions are likely to occur in the initial phases of interaction and thus reduce the likelihood of further interaction of the kind necessary to eradicate stereotypes"

These common-sense typings then tend to be generalised outwards to encompass all those suffering, for example, a hearing impairment, regardless of differences in degree or severity of communicative incompetence. It is critical to my argument to note that it is principally via stereotyping that the hearing impaired tend to be viewed as a homogeneous group, exhibiting similar 'symptoms', demonstrating similar (in)capabilities, - usually at the lowest common denominator of competence - and exhibiting similar behaviour patterns. The process of stereotyping actually lies at the heart of my case concerning the validity of a comparative analysis. It is highly germane to the way the hearing impaired tend to be fairly uniformly classified and categorised by others and their fundamental heterogeneity - of personality, capabilities, other qualities - obscured and denied. By focussing on one particular 'trait', the stereotyper treats as similar those who are, apart from this one defining trait, as uniquely different as any other group in the population.

It occurs particularly in the face of ambiguity, when peoples' taken-for-granted assumptions about the world are overturned. Ambiguity is pivotal in interactions between hearing and hearing impaired people, and, as BECKER, G, (op.cit) notes "...has the most negative effect on interpersonal relationships".

The instinctive impulse is to try and re-order the environment and re-impose one's own meanings on it, thus reasserting the primacy of dominant moral norms. Stereotypical knowledge tends to fill the gap, and the 'faulty person' is stigmatised.

The relationship between stereotyping and stigmatising behaviour is readily apparent. The discrepancy between a person's actual and virtual identity (GOFFMAN, 1968), ie. between the attributes he possesses and the stereotyped assumptions of others, provides the entrée for imputations of deviance.

Thus discrimination and inequality of opportunity become justified and rationalised. A cyclical pattern is set in motion reinforcing already existing stereotypes and ensuring their reintegration into the culture as received knowledge. The basis for further inequality and discrimination is set.

What is of interest here for those respondents with acquired as opposed to prelingual or congenital hearing loss is the confrontation the former must necessarily face with their own inherited cultural stereotypes. SCOTT (1969) in his polemical study of the blind notes: "If.. the blind man shares the values of the sighted, the process becomes even more insidious; for when this is the case, a man's personal identity is open to attack from within as well as from without".

A very similar situation was found in WEINBERG's (1968) sensitive study of midgets and dwarfs. He notes the shock and distress evinced by a member on first joining the association for Little People and seeing like others: ".. for in these encounters the little person is forced to recognize and acknowledge his own condition .. Like members of other stigmatized categories, these little people have assimilated the majority group values that lead them to negatively appraise their own kind".

This may partly account for the reluctance of some postlingually discreditable hearing impaired subjects to associate with their prelingually, manually communicating colleagues. It certainly helps to explain the threat which the orally deaf, who prefer to try and locate themselves, however precariously, in the dominant hearing environment pose to the latter group - and the resistance to the idea of a comparative approach.

Generally, the stereotypes surrounding the hearing impaired have been associated with images of stupidity, gormlessness, 'being a bit mental', 'mental subnormality', personal inadequacy and childishness. As WEST (1979a) suggests, there is no one single stereotype - although the image of stupidity does tend to predominate - "but a series of overlapping general images of a negative nature".

The strong correlation between deafness, 'dumbness' and stupidity is no accident. Historically, the deaf were regarded as mentally defective. Speech was considered the primary vehicle for conveying thought; ergo those without speech were incapable of thinking. They were considered ineducable until the mid 17th and 18th centuries, and often viewed as something malign and supernatural, a class apart, beyond human help, or, as HOBSON, (1953) put it: "...as the afflicted of God, and only divine intervention could make them whole".

Although the word 'dumb' as used by Aristotle⁵ did not carry its modern connotations, the stigma attached to unintelligible or non-existent speech has been very effectively translated into a broad cultural stereotype of stupidity. The 'if you're deaf, you're daft' label is the one most commonly applied to all hearing impaired, regardless of the severity of their handicap.

WEINBERGER (1978), for instance, found little difference between ascriptions of stupidity accorded to those 'hard of hearing' subjects he studied and those known conventionally as 'deaf mutes'. Unfortunately, the implications of this for comparative purposes were not followed through. He quotes NIEMEYER: "This association of a defective behaviour pattern in response to the spoken word with impaired intelligence exposes the hard of hearing to the same intolerance and contempt as that experienced by half-wits".

The maxim: distorted or minimal speech, disrupted interpersonal relations and relegation to the status of moron are synonymous with the primary clinical inability auditorily to receive sound input.

DEXTER (1964) notes the persistence with which those adjudged "dull"

"stupid" or "slow learners" are regarded as a great problem in Western cultures. He argues "...the most influential people in society despise stupidity /more/ than anything else, except dirt".

We live in a society which rewards intellectual excellence. Any evidence of 'stupidity' attracts both covert and overt discrimination.

The closely related phenomenon of 'master status' can only be touched on briefly. Suffice to note that as EDGERTON's retardates were often attributed either with outstanding feats of sexual prowess (or total ineffectuality); and WEST's epileptics with violence or 'nerves'; the hearing impaired are considered to be devoid of intellectual capacity of any kind and to demonstrate a general inferiority of personality and inadequacy.

It will be readily apparent that I am more interested in the consequences of stigma and stereotyping for its victims than in the actual construction of the label. I am aware that I am taking such labels as a 'given' (FILSTEAD, 1972; WEST, op.cit; OLIVER, op.cit), rather than dealing with the meanings which give rise to the creation of the label in the first place. However, I contend this would shift an over-emphasis from the defined right back to the definer once more - an emphasis which the early labelling theorists rightly stressed, but one which has been very much overplayed (LORBER, 1967; WILLIAMS and WEINBERG, 1970; ROGERS and BUFFALO, 1974; and LEVITIN, 1975), and one which I wanted to avoid. It is what the hearing impaired do with the label and the meanings it holds for them, as much as the evaluations of others, and the concomitant negotiations over desired outcomes, which are indicative of the essentially dialectical nature of the labelling process.

2. THE ABILITY TO RESIST - STRATEGY MANAGEMENT

My concern with strategy management is thus an attempt to redress this imbalance. To view the hearing impaired as passive victims, permanently locked in their deviant status, is quite misleading. Deviance defining can best be understood within a framework of constantly changing states in which bargaining - however small-scale - over favourable definitions

of self is continuously taking place. Whilst there may often be a hiatus, when movement is barely discernible, this often reflects the recouping of resources - a 'reculer pour mieux sauter'. Very rarely is capitulation absolute in all life domains, even in total institutions described so eloquently by GOFFMAN (1961). What is being sought is a redefinition of the situation which minimises the centrality of stigma and stereotyping which I have been describing.

It is for this reason that I have preferred to use the typology of GOFFMAN and SCHUR rather than that of LEMERT's (1951) classic distinction between primary and secondary deviation. Whether intentional or not, LEMERT's "ultimate acceptance of deviant social status" seems to betoken a distinct and solidified culmination of commitment to deviant roles.

His argument that "...deviations are not significant until they are organized subjectively and transformed into active roles and become the social criteria for assigning status"

is at odds with the innovative and dynamic nature of strategy management.

Thus I perceive the hearing impaired person as an active participant in what is a dialectical process. It is here that differences chiefly emerge and where the notion of a continuum of communicative competence and the distinction between discreditable and discredited status are especially relevant. It is also, contrary to the statements of many critics of the labelling perspective, where the issue of power supervenes. It is via strategy management that issues of superordination and subordination at the micro level are settled. It is integral to the whole process of deviance defining. As SCHUR (1980) points out: "Placing some persons in these disvalued categories necessarily implies valued status for others ... It is their rules that are applied, their standards that are legitimated, their 'respectability' and power that are sustained and reinforced".

The power to negotiate definitions varies with the situation, the actors involved, and the personal and power resources of the individual. Critically, however, I contend that for the hearing impaired it is dependent on the degree of communicative competence possessed. Although inevitably resources such as class, money, educational and occupational

status have a role to play, both the distribution of the condition of impairment and the response to it appear to cut right across class boundaries. (It is for future researchers to investigate, for example, the extent to which - if at all - middle class evaluations of speech incompetence differ from those of the working class). I have focussed on the particular theme of communicative competence as being of crucial importance

/cf. overleaf

variable because in interaction with hearing people, it is their chief referent for social understanding - and misunderstanding.

To some extent, all options are narrowed. This is particularly so when I come to consider exchange and negotiation within the field of employment. As SCHUR (1979) notes: "One of the key contributions of a labeling focus on deviance has been to show how being treated as a deviator is itself likely to result in a narrowing of one's negotiating options and resources in subsequently encountered situations. Once tainted with deviantness, a person, by that very fact, will usually have 'less to bargain with' in the future".

Even so the position is rarely static over time. Movement in and out of discreditable/discredited status is always taking place. In addition, strategies are not operated in isolation: they are often used in combination and change situationally and over time.

One further point: strategy management has perhaps been misconceived as occurring at a socio-psychological level rather than as a manifestation of the collective action of individuals. In the sense that each person's individual 'power resources' are different and unique, this is so. But as MATTHEWS (1979) has suggested in her study of the elderly, their methods of coping with stigma are not peculiar to them, but are "both familiar and ingenious and point to the similarities between social actors".

Moreover, strategies also arise collectively, and, in some cases, action is undertaken at a collective level. It is as a result of this that shared meanings and definitions are arrived at, develop and change.

I have dealt with strategy management under the following heads:

- (i) Passing - concealment, pretence;
- (ii) Normalising - deviance disavowal and denial, avoidance, neutralisation;
- (iii) Deviance avowal - capitalisation, capitulation and confrontation,
with a section on the Deaf Community;
- (iv) Politicization

(a) Passing

As with WEST's and OLIVER's epileptics, passing is the strategy which the discreditable hearing impaired, whose impediment is neither evident nor obtrusive on encounter, most assiduously strive to achieve.

It is much less a role available to the discredited hearing impaired and those with strictly visible impairments eg. paraplegics (COGSWELL, 1967;) amputees (CHALKLIN and WARFIELD, 1977;) and m.s./^{sufferers} (CUNNINGHAM, 1977).

A hearing impaired person who is able to lipread adequately and whose expressive speech is well preserved may be able to pass as normal until or unless ".he demonstrates in interaction his inability to communicate or to receive communications through the auditory process" .
(SUSSMAN, M.B., 1965)

LOFLAND (1976) has detailed some of the components to successful passing. These include: learning the 'normal' point of view and integrating this into one's view of self. For the hearing impaired who opt for this strategy, it entails a denial of deafness and a total practical and symbolic rejection of the deaf experience.

A second factor involves passing off the sign of one stigma, such as the request for repeats, as something else less shameful. An assumed pre-occupation with other-worldly troubles or day-dreaming will be dealt with in the section on deviance disavowal.

Thirdly, establishing what LOFLAND calls "a constructive circle" of 'wise' helpers may significantly improve one's ability to pass. EDGERTON (op.cit) demonstrated the importance of this tactic in his discussion of the role of "benefactors" for discharged mental retardates. Whilst relatives, spouses and close friends may be relied upon to 'fill in' gaps in the conversation, this poses tricky problems for the hearing impaired. Attempts to summarise sotto voce are themselves attention attracting devices. The role of "benefactor" tends to be more a feature of the profoundly prelingually orally deaf's strategy management. Indeed, such moral "benefactors" were found to assume an entrepreneurial role, as I shall discuss.

Finally, concealment of all potentially visible stigma symbols, primarily the hearing aid, is critical to passing. Since the availability of Behind-the-Ear aids, concealment can be effected by carefully arranged

hair-do's for women, and the simple expedient of growing one's hair by men. Unfortunately, hearing aids have a disconcerting habit of revealing their presence by whistling, or leaving their wearer stranded by the sudden cessation of battery power.

However, the price to be paid in psychological and social terms for this is heavy. In psychological terms, the person who attempts to pass is literally 'living on a leash', in case any inadvertent remark, miscuing, incongruence between question and answer which cannot be "accounted" for (SCOTT and LYMAN, 1968), should disclose what he is at such pains to conceal. The threat of disclosure is ever present. The hearing impaired person must be constantly on 'red alert' to avoid being caught out, suffering the twin problems of biography and tension management. Although GOFFMAN suggests this psychological strain is somewhat overrated, SCHUR (1979) argues, and my findings confirm that "... it is difficult to believe that concealment can often be practiced without some detrimental psychological consequences or at least without the experiencing of a great deal of unpleasantness".

Strain is the salient phenomenon for the discreditable hearing impaired victim - although, of course, in the sense of 'managing a front', it is equally important for discredited subjects.

Sociologically, ramifications may be even more damaging. Whatever advantages passing may achieve, it ensures an on-going pre-occupation with one's potential deviantness. To quote SCHUR (1979) again: "Thus passing reflects, and, at the same time, strongly reinforces 'role primacy' that deviance situations so commonly exhibit".

More insidiously for the hearing impaired it presupposes that the stigma of impairment has been more well and truly internalised than possibly even situational capitulation may indicate. It ensures that "...the deviation becomes a key reference point for the deviator even in those areas and situations in which it should be least relevant" (SCHUR, 1979)

Moreover, passing may bring in its train a sense of guilt, disloyalty to one's deaf colleagues. It entails adopting majority hearing norms particularly those concerning the abnormality of hearing impairment,

and accepting "...the societally framed interpretations that lead to the conclusions that speaking is a prerequisite to normality" (NASH and NASH, 1981).

Conflict and marginality are ever present, as if passing were totally successful, the question of potential deviantising would not arise.

Probably success in passing is reserved for very few hearing impaired people, and is often confined to specific situations such as casual social encounters where exposure is less likely. Yet such are the perceived rewards attached to 'normality' that those who are in a position to do so and at least partially carry it off will attempt it. Many hearing impaired resort to pretense in order not to disrupt the flow of an encounter, conveying the impression that they have heard and understood when they have not in the hope that they can repair the omission later. Often responses are kept to a minimum. Bizarre results and concomitant social rejection are the risks attendant on trying.

As concealment becomes increasingly problematic, we move along a continuum of strategies from fairly successful normalising to failed normalising, and deviance avowal (volitional or non-volitional).

(b) Normalising

(1) Deviance Disavowal and Denial

Such strategies centre round the attempt "...to convince others (disavowal) and oneself (denial) that the deviation is not really an impediment to normal existence" (SCHUR, 1979).

It represents the efforts of many physically impaired people to achieve some degree of ordinariness in their everyday interactions with others. Simultaneously, it suffers from many of the difficulties associated with passing, 'normality' by definition being unattainable. Again, for the hearing impaired, success is at the expense of tacitly accepting the legitimacy of hearing peoples' imputations.

DAVIS (1961) has neatly highlighted the practical problems of this form of normalisation. He suggests several stages of interaction must

be 'worked through' before any semblance of normality can take place. The best that can often be hoped for is what he terms a "normal, but.." outcome: the continuing problem of "..sustaining the normalized definition in the face of the many small amendments and qualifications that must frequently be made to it".

This involves a certain relinquishment of freedom of choice in return for being spared the worst indignities of being stigmatised: for instance, concurrence in the 'inability' to handle the phone in return for face-saving concessions in other areas.

For those hearing impaired whose expressive skills are still reasonably intact the use of humour as a lubricating device is a useful tension reliever. "Acting the buffoon", however, has a way of reinforcing those stereotypes already in existence. And, importantly, because the frames of reference of hearing and hearing impaired are often incongruent, jokes may backfire. It is not, of course, a device open to those whose communicative skills are more than mildly deficient.

The chief problem, therefore, about deviance disavowal is that of persuading others to go along with it. This kind of denial is seldom easy and requires considerable personal and power resources, as well as commitment, to make a success of it.

(ii) Avoidance/Withdrawal

COGSWELL (op.cit) notes of her paraplegics: "Friends are attached to definitions of the paraplegic as he once was and have difficulty relating to him as the new person whom disability allows him to be".

A frequent finding particularly for the newly stigmatised person, for example with acquired deafness, is the tendency to withdraw into isolation. Indeed intense isolation and loneliness were characteristic features of the hearing impaired investigated by HERBST and THOMAS (1980). The turning to people of a lower social status - a strategy adopted by DAVIS' polio victims (op.cit) - does not seem to represent the reactions of those with acquired hearing impairment. Hearing loss, apart from the

culture evolved by the signing deaf, is essentially a lonely handicap.

Total avoidance, however, is not generally common although periodic mental 'switching-off' may characterise a hearing impaired person's response to exclusion by others. Day-dreaming, for instance, may be regarded as a kind of avoidance, resulting from being unable to follow what is going on. Contrary to the suggestion of BRIEN (1983), it is a ploy used by both discreditable and discredited respondents.

A more usual response is simply to shut off various aspects of their lives which had previously been taken for granted. A restricted social life was particularly common amongst discreditable respondents. As SCHUR (1979) notes: "...the technique is less one of compartmentalising different established parts of one's life than of avoiding intolerable compartments".

The interaction necessary in the sustained context of work, however, may mean the problem cannot be so neatly disposed of. Only a relatively few hearing impaired people are able to take refuge, for example, in the noise of an engineering machine room as an excuse for lack of social interaction.

What avoidance does accomplish, however, is a deflection of pain. It successfully heads off the anticipated avoidance of others.

(iii) Neutralisation - and rationalisation

SYKES and MATZA (1957), ROGERS and BUFFALO (op.cit), and SCOTT and LYMAN (op.cit) have addressed themselves to this device. The former, although primarily concerned with juvenile offenders, cite a number of defence mechanisms, of which "condemnation of the condemners" is particularly apposite. Many hearing impaired people not only despise the apparent inability of hearing people to concentrate at work but hearing people are disparaged for their ignorance, intolerance and lack of understanding of what deafness means. Sometimes, the attempts of hearing people to sign will provoke laughter, particularly if the attempts result merely in crude pantomime.

Recourse to "accounts", such as day-dreaming, pre-occupation with other affairs, a bad cold - and the attempts to explain these - are used a great deal to justify 'gaffes' which might occur as a result of having misheard. It is a common situation. A delicate balance must be struck between the risks of eliciting irritation and impatience by requests for repetition, the possibility that one's "account" will not be accepted, or risking total disclosure by failure to respond appropriately.

Sometimes such "accounts" take the form of rationalisations for apparent inattention. Their function is that of "redefining the activity in such a way as to reduce the shamefulness" (SCHUR, 1979).

Again, communicative skills as well as the situation and status of the actors are all important. "Accounts" may 'pass' in some situations and totally misfire in others. SCHUR (1979) notes: "There are probably types and degrees of accountability and types and degrees of acceptability, to various audiences, with respect to the justifying accounts that people offer".

(iv) A Note on Prior Disclosure

Insofar as a prior choice still exists, opinions regarding the disclosure of impairment and its effect on subsequent interaction vary. Some argue that advance disclosure of handicap, if handled in such a way as to convey the impression that it is of little consequence, can very effectively neutralise the strain and unease which would result if the impairment were immediately evident or obtrusive on encounter (HASTORF, WILDFOGEL and CASSMAN, 1979). But no distinctions were made in their experiment as to which impairments elicited this more favourable response. I would suggest that for the discredited hearing impaired advance disclosure would make little difference. The handicap is interaction.

For the discreditable hearing impaired, the question becomes one of how to do it. To announce "I'm sorry but I'm deaf" is likely to result in total disruption of the encounter, if not embarrassment and outright withdrawal - reactions very similar to those following interaction with

the discredited hearing impaired. To say, on the other hand "I'm sorry, I'm a little hard of hearing" is likely so to minimise the extent of the handicap as to be quickly forgotten.

As WRIGHT (op.cit) comments of the dilemma of whether to 'tell' or not: "One ought at once to admit to deafness. One seldom does as one ought. My own strategy allows X to run on, in the often justified hope that I'll begin to pick up the thread .. Unless I have to I will not let the deaf cat out of the bag. This is partly vanity, partly a curiosity to see how long I can get away with it; and to some extent because acknowledgement of deafness must momentarily unbalance the relationship so far established".

It seems, thus, that where feasible, most hearing impaired prefer the complications and unpredictabilities of avoiding direct disclosure, anticipating the response of imputations of stupidity which disclosure would entail.

Failed normalisation takes us into the life area of discredited respondents and here strategies are fundamentally different reflecting the further reduction of options available concomitant on increasingly deviantised communicative performance.

(c) Deviance Avowal

is generally something which is forced upon discredited victims. For the hearing impaired, three strategies are available, one of which, that of confrontation, has become the almost exclusive preserve of the signing deaf. For the other discredited hearing impaired, options are limited to those of capitalisation and capitulation.

(i) Capitalisation

is one of the ways in which a stigmatised person can turn his situation around to his advantage (cf. SCOTT's blind beggars, and HIGGINS' deaf peddlars; although HIGGINS notes the latter tend themselves to be stigmatised in the deaf world). A much more acceptable way is to make one's deviation into a respected job or profession.

Perhaps of all deviants, the physically impaired are uniquely placed to do this and create socially acceptable roles for themselves. The fact that so few impaired people apparently do take this way out - Jack Ashley * is a notable exception for the hearing impaired - is initially puzzling. I suggest, however, that whilst there are indeed a small band of deaf social workers for the deaf, this involves no redefinition of the situation vis `a vis the hearing world. Although laudable, such occupations are hardly "challenging" (CRAMMATTE, 1968). More fundamentally perhaps it indicates the lack of socially acceptable roles for the impaired analagous to the Parsonian "Sick Role" model.

(ii) Capitulation

For the profoundly prelingually orally deaf who are additionally functionally illiterate, avowal can become almost a form of role engulfment. This response may superficially appear to be near total in some life domains, particularly that of employment, where the hearing impaired often regard themselves as 'nothing but' 'deaf and dumb' and respond accordingly. Concurrence in the verdict of others and a dull acquiescence, resignation, demoralisation and constant humiliation reflect such a reaction. There are, however, fine gradations of engulfment and it is largely a matter of degree the extent to which self doubt and self-disvaluation are internalised. It is, however, important to note that even minute attempts to bargain - as well as failed attempts in the form of ineffective aggression - are significant indicators of a refusal to introject totally the definitions of others. The situational nature of deviance defining is also relevant here: in their home environment the incorporation of such imputations is often strongly resisted.

(iii) Confrontation

is a strategy confined almost exclusively to the profoundly prelingually
* One respondent I interviewed was pessimistic about the efficacy of Jack Ashley's attempts at reform. "Though he's deaf himself, he works for all disabled people. Deaf people don't like to think of themselves as disabled"

signing deaf. The deaf culture or, in America, counter-culture, is perhaps something almost unique amongst the physically impaired. No analogous community exists for the blind, who are without that crucial differentiating in-group language of their own. Braille does not serve such a function.

In fact the formation of a deaf culture runs quite counter to the usual assumptions held that "...avowal is less likely to occur in the case of physical disability than in the case of other deviant minorities, because rarely does a counterculture exist that insists that a stigma is a badge of honour rather than a discrediting discrepancy. While many homosexuals claim that 'gay is good' and that one ought to be proud of one's sexual tastes, those with physical handicaps do not make similar assertions about themselves or their handicaps" (SAGARIN, 1975)

Yet in America, and now at the time of writing in the UK, the signing deaf avow their status with pride. The situation is thus very different for this group of discredited deaf subjects with an entrée into well-structured social organisations: deaf communities

(iv) The Deaf Community - collective confrontation

Much has been written about deaf communities recently (HIGGINS, 1980; JACOBS, 1980; BECKER, G., 1980; PADDEN, 1980; NASH and NASH, 1981; SEIDEL, 1982). Allegiance is based on shared early experiences, particularly those associated with attendance at special schools for the deaf, and the knowledge that members of the group are likely to share "... similar criteria for judgements of values and evaluation of performance .. Thus, interaction within a group is generally easier and more extensive than with outsiders" (PADDEN and MARKOWICZ, 1975) ⁶

They are not surprisingly characterised by an innate conservatism and parochialism which often denies membership to the doubly stigmatised - Black deaf (ANDERSON and BOWE, 1972); and Gay Deaf (ZAKAREWSKY, 1982).

However, shared allegiances and pride in being deaf are necessary but not sufficient conditions for membership. It is pride in sign language and open preference in its usage which are integral to this commitment. As BECKER (1980) notes: "The creation of a speech community based on sign language is probably the single most significant factor in

the formation of a deaf community".

The same may be said of other minority groups: Hebrew, Spanish for the Chicanos, and Black English. Preservation of their native language is often the only source of survival. SOTOMAYOR (op.cit) has documented the rebirth of ethnic pride and identity amongst the Chicano population, consonant with a revitalisation of their language. So it is with the signing deaf - and explains the many fears of its adulteration.

The formation of such communities with the aim, ultimately, of changing society's stereotypes about deafness is one of the few ways in which a dominant stigma ideology may be challenged and modified (cf. GUSSOW and TRACY's 1968 study of a Leprosy Home). For the hearing impaired it is perhaps the only way but by definition must exclude that numerically larger population of the orally deaf who eschew sign - the 'rubber lips', 'flapping lips' or 'goldfish' as they are sometimes disparagingly known by their signing colleagues. No such sense of cohesion centres round skill in lipreading.

Membership of a deaf community has profound implications for stigma management. It decreases feelings of deviance whilst simultaneously heightening a sense of belongingness. It enables members to preserve their "... personal integrity from societal aggression through the media of rationalisation and ideologies of the specialized culture" (LEMERT, 1951).

HIGGINS argues that the profoundly prelingually deaf have experienced slights and ridicule all their lives. It is the signing deaf protected by such communities who have, to a large extent, learned to shrug it off. Unlike those trying to merge with the hearing world, to whom stigma is highly salient, he argues, "...members of the deaf community often deal with particular stigmatizing behaviors of the hearing by ignoring them. For example, members are so used to the stares that their signing attracts they no longer pay attention to them".

(Critically, however, this is not a device which guarantees immunity at work where, as will be demonstrated, the signing deaf are treated more or less on a par with their profoundly prelingually orally deaf colleagues.

Sign is irrelevant in confrontation with a hearing world).

Gallaudet College is a unique example of such a deaf community. Not only has it triumphantly rejected the stigma theory of the dominant hearing culture. It has developed such an effective counter stigma ideology that minority status has been transformed into majority status - within its campus. Roles are thus effectively reversed. At Gallaudet, it is the hearing person (and the orally deaf unable to sign) who become the new 'outsiders'. The most a hearing person or an orally deaf person may hope to achieve is courtesy status. Nevertheless, the implications for change are staggering. The College is now in a position to redefine previously entrenched power differentials - on the outside.

Until a couple of years ago, it could legitimately be said of the deaf community in England, traditionally organised through the 19th century survivors of the Missions for the Deaf (Deaf Clubs), that it had not reached anything like a similar degree of political maturity and sophistication. They provided the traditional functions of reassurance and a sense of belonging and protection from the harsh realities of a hearing world.

With the publication of the "Deaf Manifesto" (Appendix 10) and the National Union of the Deaf "Charter of Rights", the signing deaf community is on the move. Perhaps a double paradox is at work here. The signing community is on the move precisely because it is repudiating the process of stereotyping and its accompanying denial of differences. It is emphasising its one unique difference: its language. At the same time, it perhaps cannot yet afford to accommodate the differences of its orally impaired colleagues. Deaf too, they tend to be located too near the values of the hearing world for comfort. And its discredited members, with no vehicle of communication other than gesture and home-made sign have little to offer.

(d) Politicization

is thus a relatively rare phenomenon. To date, it has only been with the above-mentioned creation of a militant signing counter-culture with its own stigma ideology that has made some change possible. As a strategy it is much closer to a political solution than any of the afore-mentioned tactics and represents a highly developed collective social response to labelling. The Law Centre on Gallaudet Campus, for example, has been instrumental in taking cases to the Supreme Court concerning the non-provision of interpreters⁷. However, despite assertions that benefits will ultimately accrue for the orally deaf, I am unhappily of the opinion that this may not materialise.

Nevertheless, the emergence of a political role for the signing deaf, incorporating legislative measures against discrimination together with a positive policy of re-education is, perhaps, the only means of eventually eliminating the problem of stigma and stereotyping of the hearing impaired. It is a strategy I should like to see being adopted in conjunction with other impaired groups. The demonstrations against the non-implementation of sections 503 and 504 of the 1973 Vocational Rehabilitation Act which led to a 'sit-in' by many impaired groups in Madison Avenue in 1977 are beginning to make an impact. Such action is barely in its infancy in the UK⁸. As noted the factionalism characteristic of the hearing impaired world itself is also a feature of many other organisations for other impaired people.

Re-education on its own has been shown to be singularly ineffective (CUMMING and CUMMING, 1957; OLIVER, 1979). Yet politicization does have its difficulties. As SCHUR (1979) points out: "Even as it seeks to legitimate the deviation such effort necessarily gives great primacy to it".

There is also the danger of alienating more moderate elements of one's group. For non-conformism to be a success above all it must be credible.

Nevertheless, despite many hearing impaired peoples' preference for

strategies other than confrontation and politicisation, and the schisms which unite rather than divide, it seems there is growing recognition of the limitations of reliance on traditional channels to achieve change.

SCHUR (1980) argues: "What is possible for individuals and groups participating in stigma contests keeps changing, in part through their own continuing efforts to maximise resources, manipulate key symbols, monopolise decision-making, and in general gain and wield social power!"

The attempts of the deaf to have a say in how their children are educated, rather than having educational policies dictated to them by the hearing majority is one such small step. Ultimately the issue is one of power: of the power of the defined to reverse negative evaluations made of them and impose their own definitions. Inevitably, perhaps, such strategy management will proceed unevenly, some groups being more successful at any one point in time than others.

4. OUTCOMES

The applicability of stigma, stereotyping and strategy management to the world of work as conceptual tools will readily become apparent in discussing the empirical findings. Indeed, indications as to their 'fit' have already been noted. It is, however, in relation to outcomes that a deviance model has particular relevance to the field of employment. Deviance emerges. The prevailing situation is shaped by preceding outcomes which in turn may have ramifications for further outcomes.

I have used the notion of deviant outcomes in both senses referred to by SCHUR (1979), ie. as "a concrete state of affairs", and as "a definition of the situation", rather than choosing to focus on a Beckerian model of a 'deviant career'. Two reasons are responsible for this: one practical, the other theoretical.

Firstly, it has been difficult to trace sequentially the employment careers of all hearing impaired respondents as representing distinct phases in the incorporation of deviant status. This would have required a longitudinal analysis. However, the implications for further deviantising are readily apparent from the material at hand.

Secondly, I contend that such a model, focussing as it does on the

apparently regular phases through which people pass on the way to becoming fully-fledged deviants - "learning to act according to the norms of the deviant, learning to reject the 'square' society.." (SAGARIN) with which BECKER (1963) describes his marijuana users takes insufficient account of the situational nature of deviance defining.

Its applicability to the problems of the hearing impaired in employment is questionable; it is only socially that the signing deaf consciously enter the deviant culture of the deaf community. Employment is but one - albeit a critically important - life domain. It is a moot point whether other hearing impaired people do pass through such conveniently mapped stages of moral career development. I prefer a viewpoint which posits the existence of many pathways, exits and entrances, and the "uncertain mobility" suggested by LUCKENBILL and BEST (1981) to characterise the careers of hearing impaired respondents at work.

Nevertheless, the processual, amplificatory nature of the deviance defining process is a particularly useful vantage point from which to look at 'outcomes' within a situation where interaction has to be sustained but which does not have all the characteristics of a total institution. The stigmatised hearing impaired can only escape physically from an accumulation of negative definitions at work by dismissal or voluntary walk-outs. Such tactics, however, carry deviant penalties and further deviant outcomes in themselves. Whilst definitions have a tendency to snowball, however, this is not an irreversible, irrevocable process. It is, nonetheless, one which is both more likely and more visible in a sustained situation than in casual social encounters.

Thus, in the situation of employment, deviant outcomes may be located on a continuum: those tangibly evident as "a concrete state of affairs" such as unemployment, underemployment, lack of promotion prospects; those less tangibly conspicuous in terms of exclusion from participation in work-related tasks, such as use of the phone, participation in meetings; and very much a definitional problem in relation to exclusion from social activities

centred in and around the workplace, and in the incorporation of feelings of strain, lack of self-confidence, inadequacy and anxiety.

I have used the term 'secondary deviant outcomes' to characterise the latter. However, the situational and fluctuating nature of this process suggests that LEMERT's somewhat fixed notion of 'role primacy' is slightly misguided. The incorporation of such a discredited identity based on such feelings "... may or may not become the basis .. of a lasting or substantial identity" (FABREGA and MANNING, op.cit).

Nevertheless, these particular outcomes did tend to be more universally incorporated into definitions of self. They are 'secondary' only in the sense that in the context of employment they seemed to provide a sustained backdrop against which other, more tangible outcomes, were highlighted.

What is central to my argument is that outcomes are themselves the results of a complex interactional process whereby meanings are attributed to a condition - in this case communicative incompetence. These outcomes in turn give rise to new problems for their victims and further deviantising.

In no sense do I regard my societal reaction stance as in any way incompatible with a more structuralist approach. The implication that structural issues are somehow prior to interaction totally misconceives the fact that interaction is fundamental to the instigation of such structures or outcomes. Alternatively, the two may be seen as standing in dialectical relationship. As SEIDEL (1982) notes: "Larger social structures and relationships are continually recreated and sustained through these interactional processes" - and, at the same time - "These structures and relationships also provide the context within which any interaction can occur".

But I contend it is the interactional process which is the prime instigator of change and development. The ability to impose one's own definitions over alternative constructions is above all a human accomplishment. It is precisely the thrust of my argument that any breakdown of interaction which accompanies violation of interactional norms is a fundamental element in the creation of negative outcomes.

5. THE DEFINITIONS OF OTHERS AT WORK: ADDITIONAL OBSTACLES, PENALTIES, EXPOSURE AND CURTAILED BARGAINING POWER

Having looked at how stigma and stereotyping manifest themselves generally in reaction to communicative incompetence, and explored some of the varying strategies differentially available to discreditable and discredited respondents, the thrust of this thesis centres on an extension of these working concepts into one area critical to survival: that of work. Some indications of the potential fruitfulness of such an approach have already emerged in the foregoing discussion. I contend it is one of the key areas where the shared experience of devalued status - common to a range of hearing impaired people - is at its most exposed.

First, however, the reader may well wonder at the omission within the text of the traditional section relating to the literature on employment. It is precisely the limitations of the existing body of literature however, which have largely justified this present exercise. Whilst I have been obliged to take what is quite a vast body of literature into account - and a full description and analysis may be found in Appendix 1 - it is marginal, and thus distracting, to my argument. It is almost exclusively of a fact and figure orientation, characterised by diverse methodologies and data collection processes, so as to render any attempts at comparison otiose. It is also largely devoted to an examination of the profoundly prelingually deaf (however defined). No attempt is made to locate the data within any kind of conceptual framework to give coherence to the findings. Although providing a useful springboard to this research it is this latter dimension which I hope to provide. Hence the extension of my perspective.

It was an application hinted at by GOFFMAN (1957) in one of his earliest writings. He suggested that by looking at how spoken encounters succeed or fail, "We have a lead to follow in the understanding of other kinds of commitments .. By looking at the ways in which the individual can be thrown out of step with the sociable moment, perhaps we can learn something about the way he can become alienated from things that take much more of his time".

Paradoxically, at a time of chronic recession and escalating unemployment, the symbolic value of work and financial independence have never assumed such importance. The power of the Calvinist work ethic seems to be in inverse proportion to the means available for satisfying it. Work plays a crucial role in the formation of a 'core identity', and in the general evaluation of a person's status. It is one of the chief criteria by which others evaluate our competence and effectiveness as people.

Deprived of it and more importantly of the 'by-products' of work, particularly the ties with social 'reality' which shared experiences with others outside the family bring (JAHODA, 1979; 1982), a person's self-esteem tends to be effaced. This also applies to a form of unemployment, that of underemployment which particularly appears to affect the hearing impaired. For the purposes of my argument it needs to be appreciated that it is the social world of most adults which is actually structured around work activity. As WILENSKY (1967) notes; "Work remains symbolic of a place among the living".

The implications of this for those deficient in communication skills may be taken a step further. Jobs, of course, differ markedly in both the amount of interaction they require and the amount they will allow. Generally, however, jobs have become more communication-orientated, with the well-documented shift into the service sector; and it is oral communication which is the predominant mode for this kind of work. As NASH and NASH comment (1981): "...urbanization and the increased specialization of work has created more white-collar jobs. Essentially, these new jobs may be thought of as 'information' jobs. They deal in various ways with telling about something, organizing or processing something .. Such occupations place a premium on communication".

In addition, communication skills within the work setting are a prerequisite for 'getting on'. "...the deaf adult who overlooks or ignores opportunities to learn how to establish good interpersonal relationships with hearing people on the social level greatly minimises his chances for employment or continuity of employment" (ADLER, 1963).

Not only are tensions and difficulties typically 'talked through': promotion, for example, is heavily dependent on an ability to 'oil the wheels'.

Moreover, it is not enough just to be able to communicate to 'make it' in the world of employment. A more formal style of language is appropriate in the employment situation than in casual social encounters (such as in phone management, handling an interview, group meetings). One needs to be able to talk 'correctly' - if there is such a standard to adhere to in many work situations. This often requires "...the use of a form of communication that is elaborate in style" (NASH and NASH, 1981)

rather than resting on presumptions about understanding social context.

ARGYLE (1972) further suggests that this more formal approach is reflected in the fact that "There is more talk about the task in hand, as opposed to general chat; more concealment of personal problems, emotional states, irritation with others, financial situation and ambition; more concern with what others think of one, and more concern with personal appearance; a greater need for reciprocity from others before helping them a second time" (my italics.)

Whilst not agreeing with some of his contentions, I am fully in accord with the stress on appearance (which, I argue, includes speech 'appearance'), awareness of the importance of the evaluations of others, and his emphasis on reciprocity.

Thus the possession of a restricted speech code, whether it be Black English, 'working-class' dialect or accent, or that arising from a deficiency in communicative competence - all of which in varying degrees violate the norms of interaction socially - leave its possessors at an added disadvantage in employment.

I am therefore inevitably concerned with the additional communicative demands which employment poses for the hearing impaired in terms of what might be conceived of as 'semi-structural' difficulties: problems with the phone, participation in meetings, supervision, following instructions, which themselves may give rise to deviant outcomes.

My argument is, firstly, that these 'obstacles' are defined as such because of the way violations of expected norms of interaction are so negatively evaluated by the hearing majority. Secondly, many such pur-

Ported 'difficulties' could well be surmounted were it not precisely for the operation of the processes of stigma and stereotyping which I have described. The very fact that such constraints are seen as 'insuperable' attests to the pervasiveness of the underlying process. Extrinsic limitations become legitimated as 'intrinsic' to the hearing impaired person's handicap. It accounts in large measure for a reluctance on the part of employers to tackle difficulties which, in many cases, are amenable to solution. Untackled they further deviantise. For professionals engaged in placing the hearing impaired, the range of jobs for which their clients might well be suited is restricted and stereotyped; on employers' parts the availability of equipment, such as amplifiers, TDDs* is rarely taken up. Job opportunities and the quality of working life generally is significantly reduced. Moreover, it is reduced in a way which goes well beyond the limitations inherent in the nature of the handicap itself. (This is a theme to which I shall be making constant reference).

'Constraints' lead to further deviant outcomes in the form of denial of economic opportunities. Enacted stigma is as relevant as felt stigma in the realm of unemployment, underemployment, lack of promotion prospects.

As noted earlier the issue is one of power hence my emphasis on strategy management. Whilst I accept that basic structural questions regarding the distribution of power are not within the interactionist's special province, they are reflected in the negotiation and bargaining for status at the micro-level. As SCHUR (1980) has noted: "Deviance defining represents one key arena within which such distributional outcomes emerge and undergo change .. by definition, since they are modes of disvaluing and discrediting, the designation of deviance and the deviantizing of individuals involve the exercise of power and affect the subsequent distribution of power".

Individuals who have been designated as in some way shameful are both socially and economically subordinated in the general scheme of things.

* Telephone Devices for the Deaf

Extending a societal reactions perspective into the specific field of employment has meant that stigma and stereotyping are perceived to manifest themselves at different levels: overt and covert, informal and more formal processing, one level reinforcing the other.

I have argued that what happens at the micro-level in face-to-face interaction generally is crucial to the construction of meanings about what constitutes hearing impairment. This can be translated directly into the employment situation. Economic constraints - or stigma reactions - are intimately interwoven with my basic concern which is to explore what I consider to be the more crucial informal level of social contacts at work. The interface between hearing and hearing impaired at this level is pivotal to the whole framework of my thesis. It is here that evaluations are made, definitions acquire their salience, and the impact of stigma and stereotyping possibly at its most subtle and pernicious. It is these small beginnings which set the stage for future deviant status. It is the face-to-face contacts during the daily round of work, the ability to 'have a giggle' during the tea break, to gossip in the changing room, to share in the back-chat when the boss is not looking, as well as accompanying one's workmates to the pub and sharing in meal breaks, which form the fabric of social cohesion at work. Exclusion from this further legitimates the more tangible outcomes I have indicated. The importance of such 'back-chat' cannot be over-emphasised. In making an otherwise intolerable job marginally congenial, its role has been vividly described by ROY (1976).

Thus, more intangible stigma reactions in terms of avoidance, exclusion, teasing, ridicule, mockery or segregation from the intimacy of office or factory life are both powerful identifiers of shameful status in an exposed situation and deny the victim that acceptance in an area critical to his self-esteem.

As indicated in Chapter 1, the response in terms of strategy manage-

ment is likely to be situationally somewhat different from that in casual encounters for a number of reasons:

1. The hearing impaired are required to interact and function in a completely hearing world - the number of jobs where more than one hearing impaired person is employed is negligible. Thus opportunities for avoidance strategies, or seeking the solace offered socially by membership of the deaf community are radically reduced;
2. Any departures from 'standard' communicative competence tend to be more nakedly exposed. Employment is generally a situation where one's abilities - and deficiencies - are public property (in common with life in a total institution). Thus the areas available to the control and maintenance of more favourable definitions of self tend to be significantly curtailed. Strategies of passing and concealment are much less likely to succeed.
3. Most hearing impaired people are economically dependent on the hearing majority for a job (few are self-employed). Hearing people control work and monopolise definitions of 'reality' in the job situation. Thus hearing norms must be complied with. Confrontation, or the presentation of an alternative stigma ideology are strategies which, respectively, either tend to lead to 'trouble', or fail to carry any credibility.
4. If the hearing impaired are to be self-sufficient and maintain their economic independence, the situation has to be sustained. The continuous experience of humiliation and shaming which, as we shall see, characterises the perceptions of many respondents at work, has somehow to be lived with. Escape avenues, as I have argued, tend to be not only ineffective but to lead to harsher deviant outcomes. This gives no encouragement to strategies of politicization.

Flexibility for manoeuvre is therefore somewhat circumscribed. The weaving in and out of discreditable/discredited status characteristic of more casual social encounters is much less a feature of the work situation. Not that room for manoeuvre is ever totally restricted, as both the

studies of GOFFMAN (1961) and COHEN and TAYLOR (1981) have shown. Employment, perhaps, represents a mid-point along a continuum of situations representing optimal and minimal manoeuvrability, sharing characteristics from both extremes.

Thus the extension of a labelling perspective into the field of employment means we are dealing with an extended continuum of stigma responses: from socio-psychological and moral defilement at a close interpersonal level of peer contact; to economic "containment", manifest in the denial of equal access and participation in the economic goals of our society. And, generally, the greater the degree of deviation from 'standard' communicative competence, the greater the difficulty the hearing impaired will tend to find in negotiating desired outcomes for themselves.

I contend that the choice of employment as an area for extension of interactionist analysis is more than amply justified. It most vividly illustrates the interface between hearing and hearing impaired. Outcomes are often public. Defilement may be exposed. The differential incorporation of fairly uniformly applied stereotypes against a background of relatively circumscribed means of deflecting or neutralising stigma reactions demonstrates clearly how communicative incompetence is evaluated in one particular setting which places such a premium on effective performance in that area.

My primary interest lies in assessing the meanings the hearing impaired ascribe to such processes. Their perceptions are embodied in their many descriptions of events and happenings at work - often coalesced, such is the nature of biographical reconstruction - and often very painful. It is to an exploration of these perceptions and how they are dealt with to which I now turn.*

*For details of respondents' communication patterns, how they perceive the nature and severity of their hearing loss, and particulars of their employment careers and aspirations, the reader is referred to Appendix 2. The Communication Group in which I have ranked each respondent is indicated in the text by the notation I-V.

NOTES

1. Its stigmatising effects are reflected in the low incidence of hearing aid usage - even where this could make a pronounced difference to receptive skills. BIRD and TREVAINS (op.cit) found that whilst all their sample owned an aid "Three of the thirty-four subjects said that they never wore the aid .. while a further eleven subjects reported that they turned their aids off under certain conditions". Other studies have reported a similarly low usage (SCHEIN, 1968; D'SOUZA et al., 1975:) HAGGARD et.al., op.cit) found that hearing aid ownership, regardless of usage, was less than half of those with a 35dB+ loss in the better ear.

2. " In the attempt to take part in the current conversation without engrossing it entirely, one who is deaf will encounter some curious difficulties. It has been my own custom to inquire from time to time what turn the conversation has taken, and then, perhaps, the general drift, or some pointed observation which may suggest it is reported to me. I am then prompted to make an observation on that subject, which I may, perhaps, think striking or suggestive; but the difficulty is how to discharge it. The eyes are thrown round the circle again and again, to catch a moment when no one else is speaking. But nothing is harder to catch than this. After long watching for the happy moment in which a sentence may be thrust in, it may seem at last to be secured. Every tongue is at rest. Then I begin, when a start of divided attention ... apprises me that the ball of conversation had again been struck up in another part of the circle in the brief interval of an eye-blink, and I find myself involved in the incivility and rudeness of having interrupted another ... If, however, it so happens that I do succeed in launching my observation without such utter wreck at the outset, I have often the humiliation of finding that it has become stale by keeping and that it applies to a subject which the rapid current of oral talk has left a mile behind ... Sometimes, however, the very reverse of this happens: and the observation may prove to be the very same which is being made, or has just been made, or is about to be made ... The coincidence of utterance is ..sometimes so much the same ..as to call forth many merry exclamations of 'You hear!' 'You hear!' 'You are found out!' ".

3. I am somewhat apprehensive that the recent experiments trying to teach chimps to sign - Washoe, Nim, Koko, Sarah - have not improved the public image of sign, however valuable they may be to research. Moreover, these experiments leave much to be desired methodologically. Neither Washoe nor Nim was exposed to 'native' deaf signers, so the experiments do little justice to Sign Language proper. More concern should be devoted to the quality of sign to which they are being exposed. (EDMONDSON, W., 1982)

4. This is contrary to the assertion of CRAIG (1980) who found that stereotyping was rather a function of over-exposure to the more visible end of the seizure spectrum, rather than ignorance and lack of direct exposure. However, I suggest that the findings of BUNTING's (1981) study quite misconstrue the purported knowledge amongst hearing people of hearing impairment, particularly of the signing deaf (cf. Appendix 1).

5. Aristotle: " Men that are born deaf are in all cases dumb, that is to say they can make vocal noises but they cannot speak ". (From 'Historia Animalium, quoted in HODGSON, op.cit).

6. Unlike other minority cultures, membership is generally delayed

until attendance at special residential schools for the deaf give peer access. Much is made of this as a factor contributing to the 'uniqueness' of the deaf culture. Yet poverty may also be construed as a 'culture', and one is not necessarily born into that either. However, sign language is rarely acquired as a 'native' language. Most profoundly deaf children are born of hearing parents with little or no knowledge of the deaf community and an ambivalence, to say the least, at the prospect of their offspring severing family for deaf peer socialisation.

7. Barnes v. Converse College, 1977, was the first s. 504 case to be filed concerning the provision of an interpreter. It took 1½ years, however, before the Health, Education and Welfare Department finally decided that the College's failure to provide an interpreter had been in violation of the law. Other courts have ordered colleges and universities to provide interpreters: Crawford v. University of North Carolina, 1977; and Herbold v. Trustees of the California State Universities and Colleges, 1978.

In Camenisch v. University of Texas, 1978, the Supreme Court, however, "...chose to pass up an opportunity to decide whether a college or university must spend its own funds to accommodate the needs of a handicapped person" on the grounds that as this particular student had now graduated, a temporary order by a lower court to provide a sign language interpreter "had lost its legal meaning" (N.C.L.D., 1981)

8. Nevertheless, the Union of Physically Impaired Against Segregation (U.P.I.A.S.) was writing in 1976: "In our view, it is society which disables physically impaired people. Disability is something imposed on top of our impairments by the way we are unnecessarily isolated and excluded from full participation in society" (in OLIVER, 1983).

A further exception to this appears to be the efforts of Chris Davies to form a Coalition of All Disabled for the impaired themselves to press for political action. At the time of writing, this is known as "Interface". The publication of the proceedings of the Committee on Restrictions Against Disability (C.O.R.A.D.) (1982), and the subsequent attempts to have anti-discriminatory legislation put on the statute book have not, so far, been successful.

CHAPTER 4: GAINING A FOOTHOLD:
THE DIFFICULTIES OF OBTAINING A JOB

I have argued that the hearing impaired are disabled over and above the intrinsic nature of their communication handicap by the negative evaluations with which society reacts to deficiencies in one of the basic human competencies: speech performance. In terms of employment problems and prospects, I shall argue they are doubly, if not trebly penalised.

This chapter focusses on the interweaving of both official and less formal sanctioning processes. It examines the more intermediate levels of labelling relating to the perceptions the hearing impaired have of their experiences of being rejected - or being deterred from applying for - jobs. It also looks at the perceived effects of stereotyping and stigmatising which tend to form the stock, routine responses of professional helpers, both as a result of, and reinforcing, stereotyping at the micro level. As a result, lowered expectations and negative evaluations of ability tend to affect many hearing impaired respondents. Deviantising occurs at several levels here: in placing 'obstacles' in the way of the hearing impaired getting a toe-hold in the job market; by way of the restricted nature of job choice presented to them; and in the routinised nature of help which is perceived to be offered. Both formal and informal labelling processes culminate in the face-to-face encounter between hearing impaired and prospective employer, in what I regard as a classic stigma confrontation, that of the interview.

Referring to the continuum of stigma reactions which provides the framework of analysis for this empirical data, it is in the withholding of opportunities, the restriction or denial of access to various economic, social and legal goals, and the sanctioning of those who step out of line and demand more, with which I shall principally be concerned here. These relate much more closely to the end point of the stigma contin-

uum I discussed in Chapter 3. But the defining process is essentially similar in all the situations I shall be covering to do with work. It is worth reiterating that all deviantising involves the basic elements of moral and socio-psychological defilement, and its manifestation in a range of reactions from unease, and impatience, to ostracism and segregation (which I shall be discussing in greater detail in Chapter 5). Exclusion from access to economic goals can not be considered in isolation from these small, but highly significant beginnings. In this chapter, however, they will remain largely implicit.

As indicated earlier, general cultural stereotypes tend to be attributed to the hearing impaired regardless of their communicative competence, and, in the field of work, generalised to encompass a negative evaluation of all their other abilities. I propose to show how obstacles, some of which are extrinsic to the limitations of respondents' hearing loss, are created and legitimated as part of the process of denial.

Outcomes to stigma reactions generally, it has been argued, vary according to the differential communicative competence (and, to a lesser extent, salience of resources) of respondents. In this chapter, however, it will be seen that relatively little scope for public redefinition was apparent in the face of official labelling. (What went on privately, however, was a rather different matter). Rationalisation, or discrediting the discreditors, or simply by-passing the official channels altogether were the most effective techniques adopted in an attempt to neutralise the impact of stigma. However, the fact that communicative competence seemed to have less of an impact on outcomes than was the case in encounters with informal labellers - even within the circumscribed setting of work - was less well anticipated.

Similarly, little manoeuvrability was possible in the face of a refusal to hire by an employer. Responses to such intermediate labelling by superiors tended to be of a sense-seeking nature, typically couched in terms of the well-known incomprehension employers are perceived to have of

hearing impairment. This was seen to manifest itself in a general lack of sympathy, if not antipathy, a disinclination to bother, and the lack of any efforts to circumvent the difficulties which are inherent in those with a communication impairment. I contend this illustrates not only the commonplace nature of the process I am describing. Such reactions are also instrumental in defining the situation as 'insuperable'.

The result is a vicious cycle in which both the able and the less able hearing impaired are, in varying degrees, locked in society's stereotypes of them at work¹. Lacking communicative competence, or having to prove their overall competence to a generally unreceptive audience, the negotiation of favourable outcomes or re-definitions of self is rendered doubly problematic. Finally, the meanings and perceptions of unemployment as a 'deviant outcome' are explored.

First, I will turn to an examination of the more general factors which are perceived as inhibiting a hearing impaired person's ability to acquire a job. These include the internalisation of employers' attitudes to their impairment, and attempts to rationalise and explain such imputations of deviance in terms of a 'natural' and 'logical' preference for hearing people, or an equally 'logical' fear of an increased risk of incurring accidents. Jobs requiring the handling of phones had the effect of actually deterring some respondents from applying for them. Strategy management was essentially directed towards making sense - and thus attempting to neutralise - imputations of stupidity and alleged incompetence. In regard to the latter issue, strategic avoidance was often employed by discreditable respondents; discredited respondents were themselves simply by-passed.

1. FACING THE WORLD OF WORK WITH UNWANTED 'STICKERS'

Having discussed in a very general way the kind of stereotypes which, I suggest, tend to be applied with a fair degree of uniformity to the hearing impaired, regardless of communicative difficulty, the question is

how the hearing impaired themselves regard these as affecting their entry into the competitive job market.

The form that stereotyping and stigmatising were perceived to take was fairly predictable, in that the images have cropped up in much of the literature on 'the deaf'. A few examples will, therefore, suffice to illustrate the fairly common pattern of anticipated reaction.

Stupidity, and the attribution of this to all hearing impaired respondents, was a constantly recurring theme in the sample, and was mentioned quite spontaneously by respondents across all Communication Groups. Of the ten specific references to it, one will suffice to illustrate the pervasiveness of the imagery: Mr. B.J. (I) "It's in the way you relate to people. If you can't hear them, they feel you're stupid ... When people are aware of your loss it makes your intelligence look smaller". With a BA in Theology, he felt it an especially unpalatable image to digest. As SCHUR (1979) has commented, it is difficult to resist "across-the-beard" redefining by those who "count" in one way or other. Outside his marriage to a hearing wife, colleagues at work 'counted' most.

Other derogatory images were also mentioned, such as childishness, being 'mental' (in the sense of being 'mentally disturbed' as well as 'retarded'); inferiority, incapability, and - for the purposes of my argument - equation with the extreme end of the 'deaf' spectrum.

Mr. F.J. (III) remarked: "People thought if you were deaf you were childish".

Recollecting his schooldays, where everything was done for him and "you were always over-protective (sic)", there does seem to be some objective justification for such a belief. As has been suggested (MACKIE, 1972) there is no empirical grounding for the belief that stereotypes are always inaccurate. Profoundly prelingually deaf children educated at special schools for the deaf do sometimes show a pronounced lack of sophistication and maturity which makes the transition to adulthood difficult. However, any lack of maturity is often quickly remedied. Mr. F.J. appeared to have thrown this off, as he stressed,

by a vigorous rebuttal of the deaf world. The struggle was one of adhering to hearing norms.

Stereotyping in the form of defining the hearing impaired as 'mental' was commented on by Mrs. C.O. (I). The association was what bothered her. "It's like if you've been to a psychiatrist. You can visibly see your image fading in someone's eyes when they know you're deaf".

For those who assert the impossibility of making comparisons across the range of hearing impairment, I cite the following, quite unsolicited, example of how stereotyping is perceived by respondents to function.

Mr. B.S. (I) commented: "The deaf are always associated with the profoundly deaf who sign".

Similar remarks were made by two other discreditable respondents, Mr. A.E. (I) and Miss C.G. (II). Not only were stereotypes perceived to be located at the most severe end of the spectrum - bearing out the contention of WEST (1979). They indicated a vivid appreciation of what ALTMAN (1981) has described as the power to depersonalise and obscure other abilities. The master status trait of hearing loss, with all its attendant ascriptions of witlessness and mental deficiency, effectively denies the possession of any positive attributes with which to present to a prospective employer.

Two respondents were particularly aware of the imputed master status of their handicap in the eyes of potential employers. As Mr. S.L.(II), endeavouring to come to terms with a fast deteriorating hearing loss remarked, "One is identified with the disability. The category defines the person".

And Miss N.P. (I): "Having to admit that one's deaf .. It's vanity .. But it's how people would then begin to treat you .. They'd shout. Your image would change in their eyes ... I want people to see me as I am, not as deaf". And, perceptively, "When you don't think you're in this category and suddenly find you are, everything has to be re-thought".

The varying degrees with which such stereotypes are internalised have affected the way respondents view their employment prospects and their perceptions of the obstacles hindering their access to the job market.

2. 'OBSTACLES' TO BEING HIRED

That 'communication difficulties' constituted one of the basic problems was accepted without comment by all but one respondent, Mr. B.S. (who 'passed' in both work and leisure situations). It was so much a taken-for-granted factor as not to require elaboration. In one case, that of Mrs. A.B., (I) it provoked mild amusement: "Well that's obvious isn't it".

The more subtle processes underlying this, however, require more careful investigation. The perceived attitudes of prospective employers were a not unnatural initial area of enquiry.

(a) "They Don't Understand. It's like having fits".

There was a marked disinclination to go so far as describing employers' hiring policies and practices as constituting prejudice, although this was more characteristic of respondents in Communication Groups I and II than IV and V. Conceivably, to be obliged to view oneself as the object of prejudice confirms to the world the tacit acceptance that there is something shameful about one's status. Rationalisations and "accounts" were a more common response. They tended to take the following forms: Mrs. G.L. (I) "Hearing people are deaf to deafness - like epilepsy".

The equation by two respondents of hearing impairment with epilepsy is interesting, again bearing out the contention of WEST (op.cit) and CRAIG (op.cit) that lay images tend to be located along the 'grand mal' end of the seizure spectrum. It provides more substance to the idea that a similar force is at work locating the image of hearing impairment at the 'deaf and dumb' end of the continuum. Unintelligible speech is perhaps not so far removed from lay images of frothing at the mouth.

In fact ignorance of the condition (rather than exposure to it) and the perceived fear stemming from such ignorance, characterised the meanings and shared understandings most respondents had of prospective employers' views of them. They appeared to be more acceptable than an outright admission of discrimination itself.

As Mrs. L.L. (I) commented: "People are frightened and ignorant and not interested enough to learn. On this course (sic) I had new equipment, £1,000 worth, donated by Blue Peter, but no one was interested or asked how it worked. No one asked if it made any difference to my hearing lectures".

Respondents from all groups elaborated on this theme: Mrs. B.L. (IV), for instance: "It's a fear of the unknown .. They don't know how to cope with it. It's like a fear of withcraft .. a fear of the supernatural. They'd rather not touch it".

It is indicative not only of the struggle to make sense of the often continuous experience of rejections and rebuffs to which respondents were subject; but also of the attempts to dislodge the impact of such perceived evaluations by redefining the issue in terms of a lack of appreciation on the part of the definers. As will be shown, it is a strategy to which recourse is often made, when room for manoeuvre is limited.

In addition, reference has already been made to the difficulties hearing people are known to have in trying to empathise with this particular impairment, and the discomfort and stickiness which follows in not knowing how to behave (cf. HILBOURNE, op.cit). Feelings of "cognitive dissonance" (SUSSMAN, A.E., 1973) are powerful stimulants to stigma, posing a threat to our taken-for-granted assumptions concerning expected norms of interaction. I suggest that for those in a position to hire and fire, they are likely to be seen to translate into stigmatising and discriminatory practices.

It is significant, for example, that Mrs. N.F.(IV) feels she probably 'swung' her job application because her prospective employers were familiar with hearing impairment. As the literature shows, the more general tendency for employers at least to give someone a try is correlated with previous favourable experiences of hearing impaired employees - without necessarily according the successful applicant equal status if hired. Any modification of stereotyping tends to be very pragmatically based - such as paying lip-service to approved attitudes. Previous unfavourable experiences have disproportionately the reverse effect.

And other remarks indicated a readiness to acknowledge that employers were no more immune from incorporating lay stereotypes about the hearing impaired than anyone else. Mrs. B.C. (I) "Jobs available are very limited because employers feel you're not normal. Employers don't think that a deaf person could be as intelligent as a hearing person".

(b) A Preference for 'Normals'

A further rationalisation was expressed as the 'natural' predilection of employers, especially in a tight labour market, to avoid hiring someone whose physical faculties are not entirely intact. Only 7 respondents, significantly discreditable subjects, in the entire sample considered that hearing loss, in itself, was not an obstacle to obtaining a job; (5 in Group I; 1 in II and 1 in V. Miss H.Q. here was probably fortunate in having experienced the more favourable American climate to deafness with which to sustain her).

Two comments, one from a respondent with acquired hearing loss, and the other from Miss B.G. (I), prelingually partially hearing, illustrate this perceived preference for normally hearing people. Mrs. E.I. (II): "Employers would sooner take someone that can hear perfect than someone half deaf or completely deaf which is worse".

And Miss B.G.: "Employers just don't want to know .. If he's got a choice he's going to hire someone who can hear .. How do you show an employer you're good?"

In part this may be viewed as realism - reflecting an awareness that employers are not benevolent charities. In part it reflects a much more insidious internalisation of deviant status from respondents who, in other circumstances, successfully normalised their roles and relationships. Miss B.G., for example, had already proved her undoubted capabilities by the acquisition of a Diploma in Catering Management. The fact, however, that a perceived preference for 'normals' is seen as a logical and legitimate reason for refusal to hire appears to represent yet further attempts to make coherent sense of, and derive an acceptable explanation for, anticipated or repeated failures. One cannot live with continuous assaults on the self. Its insidiousness, however, lies in legitimising

the status quo.

(c) "You're a Fire Hazard"

Much attention was focussed by respondents on the perception of themselves by employers as a fire or accident risk. Again the fundamental logic behind the issue gives it spurious credibility. Of those respondents who commented, 16 indeed felt it presented "a real problem": (9 in Group I; 3 in Group II, 2 in Group III, 1 in Group IV, and 1 in V). 15 subjects, on the other hand, felt it was simply a convenient excuse to justify a refusal to hire: (7 in Group I, 1 in Group III, 2 in IV and 5 in Group V). Nevertheless, there was considerable ambivalence. 15 respondents vacillated or offered qualifications, such as it being "dependent on the place of work".

Yet the literature on accident rates shows that the hearing impaired are, if anything, not only less accident prone, but also have lower absentee rates, than the normally hearing (ZABELL, 1962; SILVER, N.H., 1974; BENDERLY, 1980). This would suggest strongly that it is indeed an obstacle manufactured and rationalised by employers, and for the 16 respondents quoted above, internalised as such. For this former group, Miss V.G. (I) for example commented: "I do have a certain sympathy for employers. If a teacher didn't hear a child scream or didn't hear a fire alarm ... I often ask myself to what extent I am a hazard. I think if you are responsible for people, the old or children, you have to develop a very special moral consciousness"

For the latter group, both Mr. C.R. (I) and Mr. C.P. (I) put the question of accidents firmly aside. Both respondents had many years' experience working on machines. As Mr. C.R. commented: "After a while you become attuned to the machine. You can tell by the vibrations whether it needs greasing or not, or whether something's wrong".

As far as the question of failing to hear fire alarms is concerned, Miss B.G. commented with exasperation: "It's been put to me so many times at interviews. So that one time I've said 'well go ahead and press it and then I'll tell you'".

As a well-qualified applicant, her subsequent refusal for the job was

seen in terms of employer rationalisation. The possibility of other workers alerting the hearing impaired to any danger situation does not seem to be a relevant issue.

The additional constraints imposed by the possession of a communication handicap at work possess the same 'obvious', 'logical' grounds for a refusal to hire as the 'obstacles' I have just discussed - difficulties with the phone, conveying and understanding instructions, supervision, participation in meetings and so on. My argument, as indicated in earlier Chapters, is that these are by no means either necessary or insuperable constraints. With a more positive evaluation of the abilities of the hearing impaired at work, such apparently insurmountable 'obstacles' may readily be overcome. That they continue to be perceived as insuperable and as 'an inherent part of the handicap', suggests the very operation of the processes I have described in the last chapter. And the situation of work itself often circumscribed opportunities for bargaining over these 'obstacles'. However, there was one 'obstacle' which, above all, actually deterred some respondents from applying for a particular job: the phone.

(d) "Jobs with a phone - they're non-starters".

In considering jobs respondents might, or might not, apply for, some respondents imposed their own strictures on jobs which involved phone duties. It was a situation often totally avoided by subjects who, in other circumstances, passed or normalised other compartments in their employment lives with some degree of success - reflecting the situational avoidance of some areas described by SCHUR (1979). Miss V.G. is fairly typical of such respondents: "I wouldn't take a job where I had to use the phone".

Similar reactions came from Mr. S.G.(II), Mrs. A.H. (I), Mr. L.M. (I) and Mr. D.O. (I). Their expressive communication skills still tended to accord them discreditable status. When it came to phone management, however, they perceived themselves to be discredited.

As I shall show later, many respondents already in jobs were either afraid to ask, or had been rebuffed over the question of installation of amplifiers. Yet not only are they relatively inexpensive; but equipment such as TTYs* (now VISTEL) are regularly used - and their installation has legislative back-up in the States to facilitate job acquisition and performance for the profoundly deaf.

Whilst the installation of amplifiers cannot readily resolve the problems of the sensori-neurally deafened, for whom amplification simply raises the threshold of already distorted speech sound, some respondents could have benefitted. The pervasiveness of imputations of incompetence, or of 'not being worth the trouble' was perceived as limiting the job application range of discreditable respondents, denying them access to legitimate economic opportunities. For discredited subjects (Mrs. N.F. IV, apart) it hardly constituted an issue when it came to the question of hiring prospects. They were not expected, nor did they expect, to handle the phone (or any equivalent). Capitulation in the verdict of others was near complete. However, as I shall discuss later, capitulation, however 'accurately' it appeared to represent a respondent's understanding of the situation at the time of the interview(s), is rarely more than partial or episodic. It did not necessarily generalise to anticipated reactions in other work activities.

Generally, however, it was felt by most respondents that hearing impairment presented prospective employers with 'problems'. I suggest that this is indicative of a much more insidious internalisation of deviant status overall than I had hitherto thought. Competition in a tight job market highlights the way any impairment is evaluated by society. For the hearing impaired, to regard oneself as a 'problem' indicates that felt and enacted stigma are strongly incorporated into one's self-image, - by discreditable and discredited subjects alike.

* Teletypewriters

3. OFFICIAL LABELS: HELP OR HINDRANCE?

(a) A Diminished Range of Jobs: "There's no encouragement in the Deaf world to expand"

It is at this point in the attempts of the hearing impaired to obtain a job that the impact of professional definitions obtrudes. As explained in Chapter 3, this was not anticipated. I had considered only employer and fellow employee definitions to be relevant. However, it is apparent that the situation cannot be quite so neatly compartmentalised. Definitions of teachers, audiologists, careers officers, and IROs are carried over and make their own impact on the respondent in employment. Each respondent is burdened with an autobiography of definitions, collected at each significant life stage, which precede - and often limit - access to other life domains. It is, therefore, almost impossible to concentrate on one process to the exclusion of the other. The two are inextricably intertwined.

Integrally related to the question of job evaluation by statutory placement officers, the range of jobs considered 'suitable' for the hearing impaired to do illustrates the way in which stereotyping and subsequent stigmatising are applied fairly randomly across the whole spectrum of hearing impairment. Routinisation by official definers is usually grounded in the stereotypes and typifications which are part of the common sense world of the labeller. At the same time, the kind of information put out by official labellers about a 'condition' adds to the common-sense stock of knowledge of the public - in this particular case, that of employers - reinforcing stereotypes already held.

Thus respondents are often placed in jobs well below their level of capability, as is indicated in the literature. It is a process, however, which affects discreditable respondents as well as discredited victims. And respondents' perceptions of the range of jobs considered 'suitable' for them reflects, revealingly, in many cases, at least superficial acceptance of such stereotyped expectations, and the difficulties of com-

batting such stigma reactions.

Ascriptions of incompetence had often started as early as school days. It is here that professional definitions of teachers of the deaf have their major impact. Often scarcely equipped with career knowledge, they have played an influential and powerful role in the manipulation of expectations and aspirations. It was commented on by Mrs. L.L.: "I don't think the deaf have a choice of jobs. It starts in schools. Hearing people totally underestimate their capacity. So the range of jobs is very narrow".

This lends some substance to the findings of MONTGOMERY (1967), LERMAN and GUILFOYLE (1970), STORER(1975) and others discussed in the literature.

Although their findings were generally applicable to the profoundly pre-lingually deaf (however defined), it is grist to my argument that some respondents without the experience of segregated schooling also felt themselves penalised by similar expectations when they came face-to-face with the statutory placement services and employer resistance. As Mr. D.O.

commented: "It's a case of 'give him the broom and let him sweep up. Then he can't cause any trouble'. Employers keep the jobs simple. ..The deaf have all got low-grade jobs, cleaning out toilets, sweeping-up .."

Thus, the relative uniformity with which the hearing impaired perceive themselves to be categorised, generally at the lowest common denominator of competence is vividly highlighted. And, as indicated in Chapter 3, the integration of low expectations of others has a tendency to become self-actualising.

Respondents tended to polarise into two camps: a small number (5 in Group I and 1 in Group III) who thought that the hearing impaired were capable of doing most jobs, given the chance, encouragement, appropriate qualifications and educational attainments. These responses tended to reflect the experiences of those whose own range of employment had not generally been circumscribed by hearing loss, and who had not internalised potential stigma threats. 5 subjects in Group I, 4 in Group II and 1 in Group V were unable to comment at all on the question, regarding it as "outside

their experience".

However, the majority of respondents who commented generally condemned the range on offer as narrow and restrictive, reflecting, in many cases, the perceived reality of their own experience. Comments spanned all Communication Groups, numbering 13 in Group I, 3 in II, 2 in III, all 5 in IV and 8 in V.

Those suffering most from a perceived restriction in their range of job opportunities tended to be those whose communication skills deviated most markedly from the norm (although this did not hold entirely, viz. Mr. D.O.'s comment). Yet it is important to note that the range of jobs experienced hardly reflects the innate, or in some cases, acquired abilities of respondents: witness Mr. H.H. (III) with $1\frac{1}{2}$ credits from the Open University to his name; Mr. E.B. (IV) and Mrs. B.L.'s (IV) literary sophistication, and the native intelligence of, amongst others, Mr. F.J. (III), Mr. M.C. (IV), Mr. G.C. (V), Miss M.A. (V), Miss R.C. (V) and Mr. D.S. (V).

And even with creditable qualifications - a Diploma in Catering Management (Miss B.G.), and a degree in Theology (Mr. B.U.), and effective interpersonal communication skills, the phone was effectively seen as an insuperable obstacle to any consideration of expanded job opportunities.

Some respondents perceived the restriction in terms of both felt and enacted stigma, and the imposition of hearing norms by professional (and other) labellers. Again, this was a feeling characteristic of respondents from all Communication Groups. Mr. L.M. (I) : "There's no real reason why deaf people can't do most jobs. An unused range is available. I think hearing people say what jobs deaf people should do".

The imposition of dominant hearing norms and definitions was a theme seized on by Mr. E.B. (IV): "People have very definite images of how they expect you to be. They say 'you can do this, but that's as far as you go'. You have limitations. They say what your limitations are. You don't have a chance to say what your abilities are.. The range is very rigid. Same old thing .. Social workers say you must be grateful for the job you've got. People here have low ex-

pectations of you. I don't want to be sitting here until I go to collect my pension. I want to use the ability I've got. But I get told off for being too aggressive. I'm told it doesn't matter what the job is so long as you've got one. But I'm a very questioning person".

At corroboration interview, more than a year later, his position had mellowed considerably, owing to his appointment as voluntary Organiser of the local Breakthrough Club. As he commented significantly, "I've got a position now. And responsibility" - this for the first time in his life. His definition of the situation had thus changed. Able to 'slip in' Breakthrough administrative work whilst others were "gossiping" enabled him to view his previously despised post as a copy typist almost as an advantage. Such abilities, however, had been obscured behind the all-embracing master-status trait of incompetent speech and lipreading performance as far as his paid employment was concerned.

Mrs. S.T. (IV) provided a ray of insight into the acculturation processes which had occurred at school: "At deaf schools, girls taught laundry and sewing; boys shoe-repairing and bakery".

It is hardly surprising that these are the expectations, if not the aspirations which are carried over into adult life - with predictable results in some cases. Both Mrs. S.T. and Miss M.A., (similarly instructed) had spent a large part of their employment careers as machinists.

Miss M.A., however, had wanted to be a fashion designer. Evidently the Careers Officer had asked Miss M.A. what she could do, as opposed to what she would like to do. The response was predictable. "I can sew. So was machinist", she signed.

The inexorability of the process was further commented on by Miss P.K.'s (V) mother. "School teacher told them only jobs you can do. Not much".

Miss R.C. (V) is, however, somewhat exceptional. Her schooling had consisted largely of embroidery tuition and religious instruction. She left school unable to read or write. She commented: "Teachers think /me/ stupid .. Feel I was taught as a child".

At the age of 18, it was her mother who taught her to read and write. Miss R.C. has now escaped peripherally from the expectations of her teachers and has a Civil Service post as a typist, with the possibility of being trained as a word processor. The attainment of literacy skills with which to enhance her job prospects represents quite a unique attempt to reverse her discredited status. It is all the more so, as her resistance to the pejorative definitions of hearing colleagues at work is in marked contrast to her total avoidance of them socially. She shuns hearing people, feeling herself to be totally shamed in their eyes. This avoidance, however, is not without a certain element of 'condemning the condemners', essential to preserving some remnants of self-respect. "Some hearing never learn sign. So slow!"

Like most signing deaf, however, her distrust of 'hearries' is an active, dynamic force. She would only consent to my interviewing her with the help and support of our mutual friend, Miss M.A. I was the first hearing person (not on professional business) ever to be admitted to her flat. The situational nature of strategy management is well illustrated by these contrasting behaviour patterns in different life domains.

Miss H.Q. and Miss G.F. (V) had also resisted definitions of them which would have circumscribed their work lives - although not without some difficulty. And Mr. G.C. (V), after many years' 'hibernation' as a Clerical Officer, was attempting to "blaze a trail" by applying to Goldsmith's College to train as a youth worker for the deaf, following several years' voluntary part-time work as youth club leader for the deaf. "First deaf person ever to go there", he signed. The provision of an interpreter at the College may allow such a proposition to materialise. The critical difference to aspirations which a positive evaluation of other aspects of his self in his capacity as youth club worker hardly needs stressing. It should also alert one to the dangers of regarding apparent quiescence as indicative of passive acceptance of others' definitions. Total absence of struggle for more positive definitions of

self is rare. (This is a theme which will be more fully developed later).

However, varying degrees of capitulation with others' definitions did often characterise the perceptions of other Group IV and V respondents. The difficulties involved in re-training without the help of an interpreter, and facing a seemingly blank wall of resistance to having occupational ideas 'above one's station', had resulted in a kind of lassitude and concurrence in the verdict: as far as job choice was concerned, options were firmly limited. "Same, same, same" as Miss M.A. signed succinctly. To the extent that apathy prevailed at the restricted range of jobs available, partial and episodic role engulfment tended to occur.

Those respondents who felt the hearing impaired had the chance to tackle most jobs tended to have little experience of the difficulties involved. The fact that the obtaining of qualifications and acceptance on to training courses are predicated on positive definitions of potential capability, rather than the almost automatic ascriptions of witlessness with which the communicatively incompetent were often subject, seemed to go unappreciated. A typical response was that of Miss P.L. (I).
"So much depends on employers' attitudes. Given the chance, I'd say there were a lot of opportunities .. If someone's skill is good and they're capable of the job, I don't see why they should be restricted".

Any alleviation of this situation is ultimately only resolvable, I suggest, by a renegotiation of the status of hearing impaired people in society. This is hardly likely to be forthcoming from the well-intentioned but paternalistic efforts of professionals, who, additionally, often have vested interests in maintaining the status quo. The catalyst which might disentangle the amplifying nature of this process has yet to materialise in the world of work.

Nevertheless, awareness of the need for political impetus for change from the hearing impaired themselves came from Miss A.S. (I): "A lot of

firms could make jobs available to the deaf but don't because they haven't got the imagination. The stimulus is going to have to come

from the deaf themselves and their families".

It was a feeling echoed by Mr. M.C. (IV). "It's up to deaf people to fight. As in the U.S. This country is way behind the States where they have deaf doctors and lawyers..".

This was not something most of the other respondents I talked with were either conversant, or comfortable with. Politicization as a strategy, was conspicuous by its absence. Yet, not only is the traditional range of jobs 'suitable' for the deaf disappearing. Without political impetus to exploit the advantages of developments in telecommunications technology, prospects for the hearing impaired are bleak.

(b) Keeping in Line: 'Help' from the Statutory Placement Services

Any discussion of the difficulties hearing impaired face in acquiring a job would be incomplete without reference to those agencies whose function, ostensibly, is to facilitate this. The paradox, however, lies in the penalising impact of definitions made by agencies cast in the role of helpers (a paradox well documented in the literature in relation to those with other impairments). Control agents, too, are interacting with others, but, unlike informal definers, organisational imperatives tend to impose an additional dimension. Official labelling involves categorisation - the officially sanctioned typication of client/patient/helpee, as a means of getting through the business in hand, and keeping the work process moving smoothly. For the client, the confrontation is generally a unique experience; to the definer, it is routine. For the former, it tends to be esteem-lowering and prospect diminishing.

In the search for jobs, respondents are often brought up against the statutory placement services: careers officers for those with segregated, residential schooling, and the DRO and social workers for the deaf for the hearing impaired in adult life.

The focus is both on an ability to acquire positive information about a range of jobs, and to secure referral for interview. It is, perhaps, another classic example of a stigma-contest. We are dealing with a bar-

gaining process of attempting to impose favoured definitions of self against an institutionalised armoury of potentially negative definitions. The deviant outcome is reflected in the kind of jobs to which the hearing impaired are referred. As noted, the range is not perceived to be encouraging.

Particularly for those whose communication deficit is obtrusive, the hearing impaired are apparently perceived by the statutory services as 'hard to place' (with all the negative connotations which such a designation implies), equivalent in status to epileptics, and the 'mentally disordered' (BROWN, 1982). This was an ascription, however, which tended to encompass all hearing impaired clients, almost regardless of the evidentness of their handicap, once the trait was identified.

It was explained that it was as much the unpredictability of the hearing impaired which caused placement problems as the communication loss itself. Moreover, that it was written rather than verbal communication deficiencies which was the deterring factor ². I disagree. I maintain it is oral competency which sets the scene, and which indicates the direction further outcomes and definitions will take.

The precise meaning of 'unpredictability' was difficult to pin down. It appeared to refer to a range of unexpected disruptive occurrence in interaction with colleagues and employers, from the stickiness and unease arising from breached expectations of normality, to outbursts of frustration and recourse to physical 'solutions'. It is precisely these kinds of stigma reactions to oral skills which are evaluated as deviant with which I am concerned.

This was, nevertheless, a particularly sympathetic Careers Officer, anxious, even, to learn Sign Language to facilitate communication at interviews. If her expectations had already become fixated at this level, the expectations of the average DRO, with little or no incentive to acquire skills and competence in dealing with hearing impaired clients are likely

to be further diminished.

Predictably, registration increased with severity of impairment. Registered respondents numbered: 4 in Group I, 2 in II, 2 in III, 3 in IV and 9 in Group V; unregistered numbered 19 (plus one lapsed subject in Group I), ie. 9 respondents in Group I, 5 in II, 1 in III, 1 and 1 lapsed in Group IV, and 1 in V. (Miss H.Q. was covered by the Affirmative Action programme in the U.S.)³.

It is pertinent, therefore, to look at the shared meanings and understandings respondents held of these professional helpers in their search for employment, where recourse was made to their services. Respondents' perceptions of the service reflected their varying degrees of direct contact with it. Actual registration with the DRO did not necessarily imply use of her services. 1 respondent in Group II, 1 in III, 2 in IV and 6 in Group V were registered, but used other sources, after a history of bitter experiences. Not surprisingly, those with most difficulty in acquiring employment were most vocal in their disparagement of the DRO. Negative comments, however, occurred across all Communication Groups.

Moreover, it is noteworthy that increased contact was not necessarily a function of decreased communicative competence. Those in Communication Groups I and II were as likely to have voluntarily consulted the service as their colleagues in Groups IV and V, for whom it was often a matter of compliance with decisions already taken for them. The perceptions of the former group, however, were hardly more favourable.

Generally, positive comments came only from those respondents who might have registered as "a precaution", but who had little or no direct experience of the DRO on which to base their judgements. Mr. N.M. (II) commented, for example: "I would have registered if I hadn't mastered what I've done in the past few months. I possibly will as a protection in case of redundancy".

Predictably, some respondents did not know what the DRO or the quota system was (Mr. A.E., for instance); or it was perceived as having little rele-

vant to offer, if respondents were securely placed.

Other respondents totally misunderstood the functions of the DRO, confusing the Green Card with a bus pass (Mr. C.S. (V)). Or, as Mr. H.H. (III) commented: "I was put on the Green Card. I find it a legal protection for other calamities, like your house burning down. You'd get that much more compensation".

(These are findings borne out by my earlier MA dissertation). They are illustrative of the routine assumptions of officials that the 'explanations' they may give are readily understood, although these are rarely grounded in any kind of appreciation of the commonsense understandings and expectations of their clients. The Quota system has been under review since 1979. Contrary to many predictions, as of July 1982, the Government decided to retain it, with all its imperfections. A Voluntary Code of Practice is being drawn up, but it is doubtful whether an improved rapprochement between DRO and client will materialise when evaluations concerning 'deviant' speech are still part of the official meaning systems of DROs.

Respondents I talked with in these sub-samples, being adult, have often been critically affected by the stigma I contend registration brings in its wake. As part of one's identikit, the Green Card does not function in the same way as possession of an Access Card. Only Miss R.C., out of the entire sample, felt she had been positively helped by the Service. I understand that 'x' only agreed to employ her if she agreed to register, rather than employing her because she was registered already.

(i) The 'Stock' Response. "They're not geared to deaf people"

Mr. L.M. recounted his frustrations with the Service. "B. useless. I got the impression he was so bored with me .. I've been asking for a re-training course since May. It's not for want of trying I haven't got one yet" (First interview). "..He muttered something about electronic wiring - the RNID's running a course, but it's for the deaf not the hard of hearing .. I've suggested interior decoration, gardening, but they say I might fall off a ladder*. I wanted information on other jobs, and they sent me a leaflet on accountancy!" (his previous job).

Stigma reactions, the lack of interest, care in communication, and

* Vertigo is one adverse side-effect of some kinds of hearing impairment. Mr. L.M. told me he did not suffer from it.

a routinised disinclination to bother overmuch only served to emphasise the second-class status which many hearing impaired have already absorbed into their self-concept from other sources.

The lack of resourcefulness in searching out alternative employment options to the traditional range of 'jobs for the deaf' was strongly emphasised by many respondents from all Communication groups. I suggest that for placement officers, certain categories of jobs are considered suitable for the hearing impaired - as they are for all impaired groups - according to a set of preconceptions about each impairment. These are culled from that readily available stock of common-sense knowledge in our society as to what 'the disabled' are capable of. Any client who queries this, or wishes to step beyond the boundaries set is a threat to the smooth flow of the organisation, and the efficiency of the officer herself.

Stereotyping is neatly geared to smooth organisational functioning. In fact, routine organisational typing is analagous to the informal social stereotyping with which I shall be concerned in the next chapter. The two are complementary. Both depersonalise and deny the actual heterogeneity amongst the hearing impaired population. As Mr. F.J. (III) commented: "The Job Centre - what they expect a deaf person to do is narrower and lower. They push the dirtiest jobs that a hearing person wouldn't take on to you. They press you to take them".

Thus, beyond routine attempts at obtaining interviews within the strictly circumscribed categories of 'jobs for the deaf', little trouble was seen to be taken to extend the range into new areas. Reactions from two respondents in Groups I and V are illustrative of this commonplace institutionalised response: Mrs. A.H.: "No one says you are capable of doing this. No one takes a positive attitude. They say Look at the cards; and then if there's nothing that takes your fancy, then it's Bye-bye. There's no real help to look for options.

Mrs. P.K. commented: "P's been asked to do cleaning". Miss P.K. interjected at this point, fiercely indicating she did not want to do cleaning.

Mrs. P.K. continued: "All they want is for her to mop and tidy up and get them off the dole. They don't take into consideration the deaf

child herself".

Thus cultural stereotypes concerning the levels of competence of the hearing impaired tend to be generalised to all hearing impaired, regardless of ability and qualifications, and are successfully internalised by officials. The result is that the DRO functions as a very effective gatekeeper to any attempts at job enrichment or enlargement. Her definitions have primacy. In turn, such stigmatising crucially affects the self-concept of those they are purported to help, and are passed on to employers, reinforcing any negative evaluations already held. This is exemplified with classic succinctness by Mr. D.O., additionally stigmatised as 'hopeless'. His weekly trip to the Job Centre evinces the stock response: " Got nothing at all, dearie. Come back in the middle of the week when it's quiet ".

(ii) Handling the System

Such are the power differentials that bargaining over alternative definitions of self is largely to the detriment of the hearing impaired client, although the extent of disreputable status imputed is still a function of the degree of communicative competence. However, faced with official labellers, whilst communicative competence made some difference to outcomes, it made much less of an impact, particularly for discreditable respondents, than had been anticipated.

However, unlike more informal definers, the Job Centre or DRO are readily identifiable targets against which minor strategy management, for example attempts at neutralisation, can be waged. Discrediting the discreditors is a not uncommon tactic, witness the caustic remark of Mr. E.B.: "They're all old boys sitting their time out until retirement".

Otherwise, a robust, positive rejection against the possibility of being ensnared in such negative, institutionalised definitions was manifested by only two respondents, interestingly from Groups IV and V, where communicative competence deviated markedly from the norm. The social and

emotional resources of Mrs. N.F. and Miss G.F., in resisting this and other stigmatising processes, will be mentioned in other contexts. Active resistance to institutionalised labelling seemed to be a much less characteristic response of other respondents from these Groups. Mrs. N.F. commented wryly: "The DRO at 'x' has got a speech impediment! .. I've always avoided registration. I'm not too keen on being a statistic. There's this Big Brother image. If I thought registration would help organise the deaf into a force then I would. It's no help otherwise".

Miss G.F. had similarly refused, shrewdly assessing its effect on restricting, rather than enhancing her job prospects.

By-passing official channels was a more successful patterned adaptation used, on the whole, by signing respondents, who were generally able to rely on membership of the deaf community to support them and facilitate introduction to jobs, thus obviating the labelling process to some extent. Miss M.A., for example, had found her latest post with the help and intervention of a friend from Clapham Deaf Club.

Such reliance of respondents from Groups III, IV and V on personal intervention from friends and relatives is in keeping with the literature on the subject. It is, however, often the result of long and bitter experience with the official placement services. It represents a situational avoidance of definitions which are not only painful, but ultimately totally demoralising.

On occasions, Miss M.A. and Mrs. S.T. displayed still further skill in avoiding the impact of penalising definitions by approaching firms direct, rather than relying on the mediating practices of an interpreter. Rejection had been the usual outcome following recourse to this latter approach. Miss M.A. commented: "Jobs difficult. Unless you can meet boss face-to-face and he will use his own judgement. Hiring a matter of attraction. 'I don't like the look of her' or 'I think she looks OK'".

Particularly affected, however, were those most in need: the profoundly prelingually orally deaf with no conventional communication

skills, with whom DROs were totally unable to communicate. If respondents are unable to consult with the appropriate service because the staff are inadequately trained to cope with their particular handicap, one may well question the usefulness of such a service. Mr. M.R. (V), for instance, was unable to visit the DRO, precisely for this reason. The onus fell heavily on his mother, who was obliged to take frequent time off work to fill the gap.

Such parents generally felt they were facing an impenetrable barrier of professional indifference and inadequacy. There was a very real sense of desparation in their attempts to make the system work for their hearing impaired off-spring; but family engulfment in failure was often a characteristic feature of their understanding of the situation. Witness the remarks of Mrs. C.S.: "I feel no one's taking any notice. I found him both jobs at 'x' and 'xx'. But when I approached the DRO she didn't like me interfering. He's been messed around a lot at Job Centres. He keeps going back and forth and gets frustrated .. It's been going on now near on two years .. I've rung hospitals .. done a lot of activity for him. No one wants to help".

Parents in such a situation were obliged to adopt what DARLING (1979) has referred to as an "entrepreneurial role" in an attempt to fill the gaps left by inadequate or non-existent statutory or voluntary provision. The Deaf community filled to a large extent, such a function for its signing members, but was conspicuously absent as a source of support for its more vulnerbale non-signing colleagues.

Mr. D.S., bewildered that his son had not been taught sign language at school, and faced with the consequences of his son's illiteracy, had subsequently done all the negotiating for D's entry on to training courses, including attendance at an Employment Rehabilitation Centre, a Government Skillcentre, and Queen Elizabeth's College for the Disabled at Leatherhead. He commented bitterly: "They don't lead you into a career at school. Careers planning was nil. I shouldn't have had to do all this. I did it, but I shouldn't have had to. Leatherhead, that sort of area, just wasn't investigated by careers People when it should have been ... The Government Training

Centre at 'x' had no provision to take boys of 16. And they didn't want to because of D's deafness. I got him in - on a person-to-person basis. So they took D. on eventually to train as a miller".

Social workers, whilst no longer specifically geared to help with job placement, were similarly seen as offering little supportive assistance in this area, although being better equipped to communicate with their clients. (A discussion of the controlling powers of these, largely hearing, possessors of an arcane visual language, and their potentially powerful role as interpreters/mediators, is, unfortunately beyond the scope of this thesis. I merely note it in passing).

An extremely uncomfortable hour was spent with Mrs. M.R., bitterly engaged in criticising the perceived inaction of her son's social worker, who was personally known to me. It posed vividly for me the dilemma of "Whose Side am I on?"

Mrs. P.K. summed up the perceptions of this group of respondents. "All the jobs she's had has been me. I've always helped her. But when P. wanted help from outside she's never got it".

The unfulfilled expectations of help which tend to characterise respondents in Groups I and II, and the total dependence on it by the discredited profoundly prelingually orally Group V deaf respondents, highlights the disillusionment experienced across all Communication Groups at a service which not only stigmatises, but in terms of delivery, is seen as totally ineffective.

This has been a somewhat brief, but salutary, excursion into the world of professionals as 'agents of social control'. The fact that respondents representing all Communication Groups felt they had experienced very similar evaluations of their capabilities - regardless of wide differences in capability and communicative competence - lends substance to my case. Any distinction between discreditable and discredited status becomes somewhat blurred.

Opportunities for renegotiation of status in an attempt to neutra-

lise the impact of such stigma reactions were strictly limited. Thus, to have ignored the official dimension would have been to distort the impact of the labelling process on definitions and outcomes. It is within the institutional framework of an agency that stereotyping has as much power to obscure the natural heterogeneity and differing abilities of respondents as occurs in informal, less structured encounters. Whilst the similarities in evaluation that I am concerned to explore are enhanced, the differences which recourse to strategy management provide are minimised. Contrary to expectations, the theme of communicative competence was of less relevance as a tool for imposing more favourable definitions of self.

This may well have something to do with the fact that we are not dealing here with stigma contests primarily between peer equals. It may well be that the power gap between definer and defined here is too great to be bridged by the kind of manoeuvres possible at a more informal level. Only the more forceful forms of strategy management, principally politicization, are likely to have any lasting impact on definitions sanctioned by an institutional framework. (This may well account for the allegations by critics of the presentation of stigmatised victims as passive recipients of the opprobrium heaped upon them, most of the labelling studies having concentrated on official sanctioning). However this view does little justice to the "minor mutterings" (MATTHEWS (1979) which occur at this level.

The complex interweaving of official definitions and less formal processing culminate in the face-to-face encounter between hearing impaired applicants and prospective employers.

4. FACING A PROSPECTIVE EMPLOYER

The successful handling of an interview is perhaps the classic test situation encountered of the management of communication skills in upwardly mobile Western societies. The emphasis on oral competence - in some cases supplemented by literacy skills in the prior completion of application forms, strikes at the very heart of a hearing impaired per-

son's deficit. It is the meanings ascribed to such a deficit in this situation which are of significance here. It is my contention that deviations from expected norms of interaction are heavily stigmatised in this confrontation - which also places a premium on oral style.

(a) Prior Preparation: Application Forms

The problems of prior completion of application forms not unnaturally affected those respondents whose written English and comprehension were poor. For signing respondents, written English syntax is very much at variance with BSL, and attempts at transliteration can lead to quite bizarre results. Mr. H.H. (III) emphasised an important point: "Forms are biased in favour of hearing people. You've got to follow their jargon. That's the problem".

Although the pattern of linguistic retardation may well be slowly changing with the increased use of T.C. in schools, my prelingually deaf adult respondents with the typical reading age of 7/8 or less (CONRAD, op.cit), are bound to feel at a disadvantage. For Mr. F.J. (III), for example, "I've trouble with application forms. Spelling. I can read but I can't spell".

Mr. G.C. (V) who is a signing respondent, nevertheless writes tolerably well. Yet he conceded: "Some questions on application forms difficult. Had to get help".

'Odd' syntax and grammatical errors on a form are readily penalised. Even if the applicant is lucky enough to reach the interview stage after having so nakedly revealed his 'imperfections', the odds against obtaining the job have already been stacked against him. As SILVER (1974) notes: "That the applicant is unable to complete a form properly only enhances a prospective employer's preconceived idea or spontaneous impression that the deaf applicant is mentally slow or generally sub-standard".

(Unfortunately, the implications of such a statement were ignored).

It is those respondents, prelingually profoundly deaf, with no speech, and functionally illiterate, who are the most stigmatised and disadvantaged in the job acquisition process. It is for this group, as

MONTGOMERY and MILLER (1977) and MITCHELL (1979) have argued, where literacy may make that crucial difference - I suggest between total role engulfment and mere discredited status in the search for employment.

There is additionally the problem of declaration of the impairment itself on the application form, which, in the eyes of Miss B.G. (I) immediately highlighted her deviant status. She commented: "Where you can fill in forms beforehand it's not too difficult. I went for one interview in a hospital. I was nervous. I had to fill in the form on the spot. It got difficult. I sensed they just weren't interested when it came to the question about being disabled".

Forced avowal was bitterly resented by such a respondent who was prelingually partially hearing, but able to normalise many compartments of her present employment and social situation.

Strangely, this was not an issue which respondents seemed to associate specifically with application forms, for jobs. Many respondents found jobs without having to complete forms. It emerged more generally in relation to acceptance or rejection of handicapped - and discredited - or discredited - status. Only one other respondent, in Group V, commented on an employer's requirement to avow her handicap, which she felt to be so detrimental to her self-esteem. Miss R.C. half-signed/
half-wrote : "Went to interview on own. Very nervous. Filled in application form. I think OK. Asked me to put 'deaf and dumb' on form. I wrote 'deaf'. Embarrassed. Hate it".

(At corroboration interview, interestingly, she was endeavouring to learn to speak. It appeared that her commitment to achievement was at least as strong as the values the deaf community places on sociability rather than pursuit of the success motif, as her attempts at penetrating the hearing world of work attest. It also represents an attempt to repudiate her discredited deaf status in the employment situation.)

(b) The Interview

Successful interview management is a reflection not only of what the person says but how he says it (MATARAZZO, 1965). The problems associated with lipreading and deviant speech have already been des-

cribed in detail. The correct interpretation of non-verbal cues is also important. Together, they form the chief sources of information for the interviewer. If performance fails to accord to culturally acceptable standards the interview is unlikely to be successful. Communicative competence is critical in projecting the image of a successful work persona.

The interview represents a highly stylised communication situation, generally dominated by middle class expectations of speech competence. Decisions are made on the basis of what is, as LEMERT (1951) points out, a "limited segmental contact". Any skill in self-presentation generally has to be made within the space of half an hour or less.

Decisions are made about people on such a first impression basis as the interview stipulates (application forms apart). For the hearing impaired, STELLE (in ADLER) suggests: "Perhaps the most difficult assignment that the average deaf job-seeker might face is that of selling himself to a prospective employer ... The impressions that are made on the employer usually determine whether a job is to be given".

As Beatrice WRIGHT (1960) has noted "first impressions of a person are especially potent in that they set up a direction that exerts a continuous effect on later impressions of that person".

Stereotyping is readily brought into play to fill any breaches in expectations. Focus on one particular trait - a hearing aid, the physical tension and strain of lipreading, or 'incompetent' speech often means a person is categorised as being of this or that 'type'. Retrospective interpretation takes place. Not only is a person of type x. He was 'that way all along'. Negative judgements may be made at this juncture which often have a direct impact on subsequent job status and identity.

While first impressions are not necessarily the main criterion determining the success or failure of a deaf applicant, they are frequently the criteria actually used. ADLER's (op.cit) study of profoundly prelingually deaf unemployed men comments further on this

"threshold" problem: "A deaf man's inability to communicate effectively and thus make a satisfactory initial impression on employment personnel officers or employers is recognised as the great stumbling block to employment".

Only when a hearing impaired person is actually in the job is he able to negotiate further whether his deviations in communicative performance are to be generalised to other fields of activity or not. Many hearing impaired never pass this threshold, such is the pervasiveness of stereotyping and master status ascription of deviance operating at the interview encounter.

For some respondents, the question of interview management was not relevant, having been secure in their jobs for a considerable period of time (Miss V.G., Mr. W.C. (II), Mrs. G.L., Mr. M.C., Mr. G.C., Miss R.C.). For others, the interview level varied with the nature of the job, some being of a much more cursory nature than others. Nevertheless, the interview situation can fairly be said to present problems of management to respondents right across the Communication spectrum.

(i) To tell-or not to tell

The question of disclosure is of critical importance, particularly for respondents in Groups I and II. Only 4 respondents (in Group I) felt confident in their capacity to 'carry it off'. The extent to which an employer arrives 'blind' to the situation, or whether the hearing impaired applicant is preceded by official definitions of others is important in making the decision.

For those actively engaged in interview management, or able to recall their perceptions of the situation, or simply speculating about it, reactions ranged from those who considered that telling would immediately jeopardise their chances of obtaining the job (5 subjects: 3 in Group I, 2 in II); to those who considered that it would not pose a problem (10 respondents: 8 in Group I, 2 in Group II); to those whose handicap was immediately self-evident, some of whom were sanguine about

the possibilities of disclosure eliciting a tolerant response (4 subjects: 1 in Group 1, 3 in V), to others a great deal less so, numbering 16 subjects (4 in Group 1, 2 in II, 3 in III, 3 in IV and 4 in V). Forced disclosure is not generally perceived by discredited respondents as leading to a successful outcome.

Refusal to tell was therefore commonest amongst those most able to pass. Yet ironically, the pervasiveness of cultural stereotypes surrounding hearing impairment was such as to make the whole subject an issue. Whether or not stereotypes of stupidity and incompetence are 'objectively' applied to the hearing impaired, they are most certainly perceived to be so.

Mr. C.P. illustrates this, and his response is fairly typical of respondents in the first category: "I might have had difficulties getting the job if I'd told anyone because their attitudes change immediately. They think they've come up against a nutter".

It is a paradox which lends substance to my argument that those furthest away from the 'worst' end of the communication spectrum appear to be at least as pre-occupied with stereotyping and the possibilities of consequent stigma reactions as their communicatively incompetent colleagues. HIGGINS (op.cit), however, would argue that the signing deaf are not thus pre-occupied. Having experienced stigma all their lives they are able to shrug it off. This may well be so socially, but, as I shall demonstrate, isolated in a totally hearing environment at work, the ability to neutralise stigma assaults has a tendency to evaporate. And the orally discredited deaf are most certainly constantly aware of it. Nevertheless, my point holds: Miss N.P.(I), for example, is one of the least impaired respondents in the sample, wearing no hearing aid, and chatting easily as she led the way up the staircase to her flat, without a backward glance at my lip movements. Yet she commented: "I'd feel terribly nervous if I had to go for an interview. I wouldn't admit at the interview I couldn't hear very well. I don't think I'd get the job .. I know I'd be rated as second

choice if I declared my deafness".

This is a policy she puts into practice in her own work, confirming both the internalisation of stereotypes and the not uncommon practice of stigmatising other stigmatised groups, a characteristic of those whose identity is already threatened: "I farm out disabled on my job. I don't say so in advance. A firm isn't going to want to see them - Black, deaf, women .."

It is, perhaps, the very unpredictability of an interview situation which affects discreditable respondents: man or woman? A board? Will there be sufficient light to lipread? Will he/she smoke, suck a pen, mumble into a notbook? What about the furnishings - will they absorb sound or reflect it? Respondents are, as it were, not only on trial for a job. Their ability to convince a prospective employer that any communicative deficiency, if evident, does not detract from overall competence, is also on trial.

One interesting example of skill in manoeuvring a situation so that passing is just about feasible was described by Mrs. C.O. It is by no means uncommon for hearing impaired people to 'take over' a conversation, giving one's interlocutors little chance to intercede and provoke disclosure. It is not, however, a strategy which can be sustained over any period of time, and may boomerang with disastrous effect on the encounter. Nevertheless, it worked in this situation. Mrs. C.O. whose perceived clinical loss is quite severe, wears two hearing aids, which she neatly conceals with a well-managed hair-do. "My interview for this job, I didn't think I'd get it. But I manoeuvred the situation so I did most of the talking, so they wouldn't ask too many questions. Otherwise an employer would just think you're stupid because you havn't heard".

Those 10 respondents who did not consider declaration of their impairment to be a problem had not incorporated such devaluative images into their self-concept. Like Miss N.P., they tended to have well monitored expressive communication skills, and little receptive loss. Such respondents illustrate the often neglected fact that stigma is not uni-

versally applicable, nor felt. It may, however, be situationally variable, Miss N.P., for example, showing no disinclination to ask her employer for a phone amplifier if need be: "You don't ask your employer if you can wear spectacles, do you?"

It must be emphasised that these were respondents whose communication impairment was scarcely evident, much less obtrusive. They could pass. (This contrasts with the very few respondents (4), forced to declare their impairment, who did not consider this would pose problems). Such respondents felt able to take the risk, unimpeded by a stigmatised prosthesis, confident, on the whole, in their ability to get by. As

Miss P.L. remarked: "I've always declared it on application forms. I don't think I've ever been debarred from a job or an interview. There are no problems so long as I can strategically place myself. I don't see it as penalising me. I get jobs from agencies. I always declare it there, too, when I have to take a dictation test. It's not been a problem".

Similar responses came from Mrs. G.L. (similarly monaurally deaf) and Mrs. S.B. (I).

Others' construction of events, however, was less happy. Several discreditable respondents mentioned the struggle involved in successfully surmounting the interview hurdle. Miss B.G.'s experiences with the fire alarm have already been mentioned. She now has a job as a cook/general factotum which, despite her qualifications, had been difficult to obtain. She had spent some months engaged in fruitless interviews. Commenting on this she said "I know it doesn't sound much, but it took an awful lot of getting".

Thus, despite fairly well preserved expressive skills, passing was not always an option available to even Communication Groups I and II respondents, particularly where receptive communication was deteriorating. Mr. S.L. (II) had a folder full of interview rejections which he showed me. He declared "slight deafness" on any application forms. A somewhat bleak pessimism characterised the understandings he had culled from his experiences. As he commented of his new, devalued status, "I've conceded a lot in terms of self-defeat over the past year".

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He described one particularly crude, brutal incident. Introduced by a friend over the phone to a publishing company, the enquiry about a possible job took the following turn: Friend: "A friend of mine is going deaf. Would you be interested ...". The reply was: "Has she got big tits? If not she can f. off ..".

He talked about other interviews: "With the 'x'. The first interview was to get rid of the riff-raff. The second interview I was turned down. There was a total lack of interest in the fact that I was deaf ... I've been turned down by others. The 'x' Legal Department because I couldn't use the phone. And 'xx'. I was ideal for the job but was turned down because of deafness. There was so much phone work involved".

Whilst the Law is perhaps not the easiest of professions to accommodate such an impairment, the kinds of accommodation which could have been made were strikingly absent. The "Reasonable Accommodation" legislated for in the U.S.⁴ which could have enabled Mr. S.L. to continue in practice with the aid of Vistel, an interpreter and some job tailoring, was conspicuously absent - a factor noted in the literature (GRAMMATTE, 1968; PHILLIPS, 1975 (a) and (b).)

This was one particular instance where even salience of resources could not modify the overriding effects of the stigma attached to one particular master trait. Whilst professional status may lead to a hearing of sorts, it by no means has that insulting capacity to control or neutralise the potentially pejorative definitions of others. Mr. S.L. described his efforts at obtaining employment whilst still at the Bar, and, ostensibly, still part of that privileged inner sanctum. Some support might well have been legitimately forthcoming, as GOODE (1967) argues. Yet Mr. S.L. commented: "There were no helpful suggestions. Had they been employers they would have turned me down flat without making any attempt at justification, because I'm deaf".

The critical point where normal within-group solidarity ceases to function additionally carries disproportionately severe penalties in terms of the shock effect on its victim. A quite arbitrary out-off point seems to operate, where deficiencies in communicative competence are just sufficiently evident to attract generalised imputations of

incompetence, and stigma reactions in the form of exclusion by colleagues and peers.

Mr. D.O., with thinning hair, was also unable to conceal his impairment. With a similar fistful of refusals, he commented on his experiences as follows: "There was one particular Personnel Manager. He said 'We must have educated people. You people don't have education'. But he'd been looking at my hearing aid. I can't manage an interview without it". He went on "Some you never hear from again. Others say 'We have to have bright people we can rely on'".

Although without formal paper qualifications, Mr. D.O. was very far from being dull. There was little doubt in his mind, however, that his hearing impairment, as indicated by the obtrusive visibility of his hearing aid, and its association in the minds of others with stupidity, was the major factor in his repeated interview failures.

(ii) Excuses - and rejection

As communicative competence decreased and deviated further from 'standard' hearing norms, passing and 'not telling' ceased to be viable options. For those in Communication Group III onwards, communicative impairment was so self-evident that attempts at concealment were quite impossible. Skill in interview management declined proportionately, as recourse to gesture and writing became more common.

Miss L.S. (III) whose attendance at interviews had been too numerous to mention said "I experience terrible difficulties. They don't want to know you're deaf. It's impossible to lipread. Employers don't take the trouble to put themselves in the light".

Thus, even where impairment was evident, thoughtlessness (or ignorance of how to behave), and a disinclination to bother were stigma reactions seen generally to characterise respondents' perceptions of the interview situation. The search for acceptable reasons to justify refusal (discussed earlier in this chapter) attests to the strength with which generalised imputations of incompetence continue to be resisted or neutralised at a personal level. Little could often be done at the practical level.

Yet both discreditable and discredited respondents well appreciated the extent to which deficiencies in communicative performance are devalued and stigmatised by employers. Mrs. S.T. (IV) illustrated how excuse-finding, where employers bothered at all, masked a contempt for her lack of intelligible speech. With a similar litany of refusals, she signed "It takes a long time to find jobs. I've had difficulties. 'xx' rejected me. They never say it's because you're deaf. Always something else".

She has, however, now capitalised on her discredited deaf status and become a part-time sign language tutor.

Mrs. N.F. has similarly capitalised on her handicap and demonstrated how a socially tainted self can be, at least partially, reversed. Not that people are ever totally passive recipients of the stigmatising definitions of others, as some critics of the labelling perspective have maintained. As LEVITIN (1975) notes: "Those labeled deviant because of a physical handicap often take an active part in the labeling process, they initiate self-definition, they insist that others define them in preferred ways, and the strategies they choose to negotiate and settle labeling issues vary with the social context in which such labeling occurs".

Mrs. N.F. has demonstrated a vigorous rebuttal of her discredited status in her work situation, and, in this sense, is perhaps, the most successful respondent in the sample.

Nevertheless, her success in obtaining a social work job with the deaf was due, she feels, to a fortuitous combination of circumstances which just happened to work in her favour. Referring to her interview, she felt that in any other circumstances, the usual stereotypes with which she was only too familiar, concerning her speech difficulties and poor lipreading skills would have taken precedence. She commented: "The S.S.D were fair at the interview. There were hearing applicants. It was a hearing panel. But the boss' parents are both deaf so they were aware of the problems. The panel was split 3:3. They thought I would have too many difficulties. But I was doing so much as a volunteer. I think I was accepted eventually because the S.S.D. was trying to prove that deaf people could work as well as hearing. They're a very go-ahead authority in that respect".

Her success here has additionally enabled her to dissociate herself

from a life-time's experience of rebuffs and rejection. She commented of our interview: "Looking at these questions I can see how far I've escaped from these statements".

Her success is somewhat unique. It represents a major reversal of deviant status in favour of the primacy of her definitions of self in one specific setting. The salience of her personal resources is as important here as it was irrelevant in the case of Mr. S.L.

Other discredited respondents engaged in job searching - or re-collecting their attempts to do so - were far less successful in neutralising or disavowing the impact of stigma reactions in their face-to-face encounters with employers. Acquiescence in the pejorative evaluations of prospective employers characterised the perceptions of Mr. C.S.; whilst role engulfment was the reaction of Mr. M.R. to repeated interview failure. Although, as noted, apathy and indifference are rarely sustained over long periods of time, they may temporarily immobilise and create an image of fixity of deviant outcomes which may be at variance with later perceptions of self and the ability to negotiate other solutions.

Thus, whilst discreditable respondents were often plagued by the fear of eliciting stigma reactions if they exposed themselves to the interview situation - and several respondents assessed their actual experience of refusal in these terms - for discredited respondents, the meanings culled from a history of rejections were of a very similar, if harsher, nature. The commonality of perceptions, however, was characteristic of respondents from all Communication Groups.

(iii) To rely on a helping hand, or manage alone?

Finally, the question of whether or not to handle an interview situation on one's own without the aid of a mediator, for discredited respondents, raises the issue of the effect a helping 'hand' has on what CRAIG and SILVER (1966) refer to as a person's "self-sufficiency image". Few signing or prelingually orally deaf respondents tackled

the situation on their own - Miss H.Q. and Miss R.C. possibly being exceptional. Miss M.A. called on help if she got into difficulties.

Responses varied with the outcome. Favourably for Mr. D.S. whose father always accompanies him. He commented: "Although he lipreads reasonably well, I interpret for him. He's been very lucky with interviews. The men have been very good. It's been a three-cornered discussion".

In contrast, Miss P.K.'s mother bitterly recalled one interview: "At one job they gave P. a really difficult job to try just so's they could turn her down without saying she's deaf".

Generally, I would concur from such experiences with CRAMMATTE's verdict that some kind of catalyst is necessary - although for rather different reasons. As personnel officers in the UK are generally totally inexperienced in dealing with the hearing impaired, if a mediator is not present to explain the problems involved in communication and how these can best be alleviated, the result is likely to be negative. However, the very presence of a third party immediately brings into play other devaluative judgements regarding an applicant's overall competence. It is a moot point which prevails.

The interview is thus a crucial factor in determining outcomes in employment. It is itself one outcome of the official labelling process in determining the kind of interviews which hearing impaired respondents are likely to obtain. It is often, as noted, the product of a series of prior decisions made by a range of professionals - from teachers of the deaf, to careers officers, and the DRO. Finally, it is also a reflection of more informal, on-the-spot evaluations by prospective employers. It is a classic stigma contest, where jockeying for a position to impose favourable definitions of self against a backdrop of potential, or actual, stigmatising ones, takes place. The power differentials, however, are often such that the possibilities for negotiation and exchange are limited.

Not only is the interview one of the major settings where communi-

cative performance is at a premium, and where the lack of skills is particularly likely to elicit stigma and stereotyped responses. It is also at this initial stage in the employment process that further definitions regarding discreditable or discredited status are set in motion. These subsequently permeate the whole employment experience of subjects.

5. BEING OUT OF WORK: ACTUALITY AND FEARS

This chapter concludes with an examination of the perceptions and meanings my hearing impaired respondents had, both of the actual experience of unemployment, and the anticipation of it.

(a) "Employment will always be bad for the deaf".

Unemployment may be viewed as the first deviant outcome at the economic end of the stigma reaction continuum in the process of defining and labelling which, I suggest, takes place throughout a hearing impaired person's employment career. It is, in a sense, a structural factor. But in terms of the conceptual framework I have outlined, it is both "a concrete state of affairs" as well as a definitional issue; as are other 'outcomes' resulting from the deviantising of communicative performance I shall discuss, such as trouble and dismissals, underemployment, and lack of promotion prospects.

This chapter has demonstrated that the fairly uniform application of imputations of incompetence and stupidity are perceived as being directly related to difficulties in acquiring employment. Bargaining for a job is the very stuff of stigma contests, in which negotiation over favourable definitions, and the movement in and out of discreditable/discredited status ebbs and flows. I have shown that in the very process of assessing someone's employment prospects, the uniform manner in which the hearing impaired tend to be categorised, both officially and more informally, tends to lead to a negative outcome.

5 respondents were currently unemployed at the time of interview

Mr. L.M., Mr. D.O. and Mrs. A.H. (Group I); and Mr. C.S. and Mr. M.R. (Group V). At follow-up interviews, 2 respondents, Mr. S.G. (II) and Mr. F.J. (III) anticipated unemployment, having been issued with redundancy notices.

Mr. L.M. had been offered a post as Registration Clerk with 'x' and, almost simultaneously, after strenuous efforts on his part, a place on a Government Training Course at Leatherhead doing horticulture, a job he had set his heart on. However, the Department of Employment has refused to confirm the offer until some agreement has been reached regarding responsibility for attention to his ears. "The Department is insisting that I see their M.O. for cleaning my ears every 6-8 weeks. My specialist refuses. They haven't got the equipment. So I haven't taken up /the clerical post/ in the hope of doing this. It would mean I could get City and Guilds. It all turns on the Department of Employment's reaction to my specialist's letter".

The outcome of this impasse was, unfortunately, not known. The professional proprietariness over what is but a technicality, and the controlling powers of the Civil Service bureaucracy could effectively jeopardise the future of someone already at risk. Mr. L.M. is, however, a normaliser. His personal and social resources, and the preservation of near 'normal' communicative skills have enabled him to overcome many other obstacles with which he has had to contend to date. It is unlikely that he will be more than temporarily deterred by a refusal here. One cannot, however, but ask what such sanctions are designed to achieve?

The experience of the other 4 respondents unemployed at the time of interview, on the other hand, reflected virtual capitulation with the definitions of others on this fundamental issue. Mr. D.O. was well aware of the cumulative impact of long-term unemployment on his on-going prospects of ever obtaining a job. He maintained his difficulties were due "to the visibility of my hearing aid and my deafness". It was difficult for him to separate the difficulties attributable to

his hearing impairment from those affecting any able-bodied person chronically unemployed. He described his perceptions of his situation as follows: "It's been nearly 2 years now. The level's dropped. I'll take anything now - car washing...The deaf have all got low-grade jobs cleaning out toilets, sweeping up .. I went to Remploy but they felt I was a risk. I wouldn't hear if something was going wrong with the machinery ... The DRO promised to fix me up with something .. But I was told I wasn't suitable. No reasons were given. I'd like to return to the Community Home, but they say 'difficulties with the phone', and then the Social Services extend it and say 'difficulties with fire'".

Capitulation with the dual stigma of membership of "The Conscript Army" (FIELD, 1977), and a minority disabled group had led to the incorporation of a certain degree of 'role primacy'. Apathy had set in. He deftly turned aside my suggestions. Yet, like Mrs. A.H., preservation of self-esteem was still sufficiently important to have recourse to rationalisations, "accounts", explanations - in an attempt to make acceptable sense of chronic failure in the eyes of the majority hearing culture.

The two respondents in Group V chronically unemployed, were both profoundly prelingually orally deaf and functionally illiterate. Unemployment is probably a frequent occurrence for this group, Miss P.K. for example, having suffered, until latterly, fairly frequent spells without work.

For these respondents with no acceptable vehicle of communication at all, other than natural gesture and home-made sign, varying degrees of role engulfment had set in, at the time of the interview(s). Not only are such victims social and occupational pariahs in the hearing world. They are also rejected by the deaf world. The deaf community provides no resource on which to draw. The entrepreneurial efforts of both Mrs. C.S. and Mrs. M.R. in trying to obtain jobs for their sons have already been commented on.

An inability to communicate acceptably with others has profound practical as well as social consequences for job acquisition: an inability

to initiate and follow up contacts; to use the few resources the community has to offer; let alone persuade a prospective employer that the lack of intelligible speech (and an inability to read and write) does not generalise to incompetence in every other sphere of activity.

Indeed, Mr. C.S. proudly took me upstairs to a room he had wallpapered, painted and decorated himself. Even to my untutored eye, it had all the appearance of a professional piece of work. But he is unable to overcome the "threshold" problem referred to earlier, where he can demonstrate his abilities, so strong is the initial rejecting stigma occasioned by his lack of speech. As Mrs. C.S. commented of her son: "Unemployment is his most serious problem. He gets a little job but he never sticks it. He's not had a steady job for a long time. Employers are especially prejudiced against the deaf. The disability isn't visible. C. doesn't wear an aid .. Sometimes I think they think he's an immigrant because of his English... One job he went back there. He wasn't allowed to lift sugar. C. just walked out. There's been trouble for about 2 years now"

The broader question of employability and institutionalised pressure to adhere to a work ethic which is fast becoming an anachronism for respondents such as Mr. C.S. - and particularly Mr. M.R. - is only germane to my argument to the extent that both respondents were perceived by others to be 'hopeless cases'. The master status trait of 'dumbness' has effectively precluded Mr. C.S. from showing what he can do. And the image had been successfully internalised by Mr. M.R. Mrs. M.R. commented of her son: "M. doesn't understand what's going on. He just accepts things .. He used to be late at 'x'. Sometimes he went in, sometimes he didn't. He's not really worried about job loss. He can't see the reason between deafness and job difficulties. He sort of doesn't make connections. He doesn't really understand he's lost his job. He keeps on going back there. He doesn't really understand about the world of work and different types of jobs. He doesn't see too much wrong with sitting in the house".

The image was not only internalised. It was a self-confirming image, in that behaviour accurately reflected others' definitions of him.

It is difficult to gauge how much of this inability to 'make connections' is due to total lack of communicative skills and a life-time's

experience of exclusion from knowing what is going on; or to what extent it represents true unemployability - in the sense that no reappraisal of capacity, cessation of constantly being ridiculed and humiliated, would lead to the inculcation of different work habits.

(b) "I don't care what I do so long as I'm employed"

However, for almost all other respondents, unemployment, or the threat of unemployment, generally menaced their sense of self-worth, in much the same way, for example, as it affected EDGERTON's retardates.

Mr. B.S., for example, commented "As long as I'm working I get a sense of self-esteem. I want to do an honest day's work. The type of work is immaterial - almost".

This was often despite the fact that their work lives were often punctuated by humiliation and rebuffs from their colleagues and peers, making life, in some cases, very hard to tolerate. Yet it was a theme commented on by other respondents. Mr. C.R.(I), after being made redundant a year ago, found this to be his first brush with the mechanics of job applications since 1948. He admitted: "My terror of unemployment runs very deep".

To what extent the (often unacknowledged) recognition by respondents that in a recession, stigmatised members of the labour force are likely to be hit disproportionately hard, is difficult to gauge. Suffice to note that of the 7 respondents recruited to their jobs before the onset of hearing loss (5 in Group I, 1 in II, 1 in Group V), all felt that were they to apply for jobs now, their hearing impairment would effectively debar them, such were the internalised expectations of ascriptions of incompetence - across the board.

Other respondents felt the pressures to stay put in otherwise uncongenial jobs. Miss M.A. signed: "Realistic about job security now. Want to keep present job. But bored. Want change. Don't like it much. But if I lose very very difficult to get another".

And Mr. E.B., although at first interview over a year ago, had been desperate for a change, was now relatively resigned to his lot. As noted, this has much to do with his newly acquired status as voluntary organiser

for the local Breakthrough Club. As far as looking for another job was concerned, he shuddered: "All that business about interviews. Work's bad for everyone . But for the deaf .. It would terrify me".

Something of a paradox operates here. Boredom, general dissatisfaction with work, and constant exposure to varying degrees of stigma reactions were endemic amongst many respondents (as will be seen in the next two chapters). At the same time, it seems that security of employment, at whatever level, is perceived as a demonstration of worth, of the ability to hold one's own in an alien, unaccepting world, as the ultimate disproof of disparaging allegations of incompetence. Whilst this was an attitude perhaps more characteristic of respondents from Communication Groups I and II, there were respondents in Groups IV and V who spoke disparagingly of other deaf colleagues "always jumping in and out of work" (Mr. M.C.), as though they were somehow showing the hearing impaired in a bad light. Job stability, however, was rarely equated with job docility.

The work ethic was still highly meaningful to respondents, and adherence to it a feature of subjects from all Communication Groups (Mr. M.R. excepted). To be excluded from legitimate access to integration into society via work took a painful psychological toll. Unemployment seemed to be equated with the incorporation of society's most pejorative images of being 'deaf and daft'. Again this held when the most crucial elements attached to being at work, identified by JAHODA (1982) were, in varying degrees, withheld from respondents. Yet 'Significant Living without Work' was not an option which held any attractions for most respondents.

Fear of unemployment amongst the hearing impaired sample I interviewed was also, I suggest, partly responsible for the lack of membership of T.U.s or professional bodies, in all but a few cases: Mr. B.S., Mrs. A.B. and Miss R.C. Active membership had been confined to Mr. F.J. as one-time shop steward for U.S.D.A.W. (He had not been re-elected

because of "communication difficulties")⁵.

Unions were not only considered unhelpful to the hearing impaired in work. To my knowledge, Trade Union representation of a dismissed hearing impaired worker at an Industrial Tribunal occurs infrequently, if at all. It is speculative, but I suggest that, like other members of the general public, crude stereotyping also operates at the level of 'brotherhood'. Communicative incompetence is evidently not worth representing.

In the same way that the 'mentally retarded' rarely attract T.U. support of their rights, the hearing impaired see themselves similarly excluded from any crusading zeal on the part of the workers' movement generally. As Mr. H.H. commented: "When the Union official looks at your Green Card, the first thing he wants to know is how much time you take off work".

Additionally, Unions were perceived as jeopardising dearly-won job security by "stirring up trouble". Responsibility for initiating this particular form of 'trouble' is rarely seen as part of a hearing impaired person's province. Mr. F.J. noted "When you want a spokesman, you don't turn to a deaf person".

The lack of politicization at work as a strategy has already been commented on. Yet, as I shall argue later, it is only by an articulation of their plight - using those hearing impaired who are able to straddle both worlds - that deaf rights, including the right to a job, may be implemented.

Gaining an entrée to the world of work, however, is only the beginning of the story. 'Sticking it out', and, even, gaining some sense of fulfillment from a job are hurdles which relatively few respondents were fully able to surmount. We have seen in this chapter how the complex interweaving between official evaluations and more informal processing serves to deny the hearing impaired, in varying degrees, access to the legitimate economic goals approved by our society. Interaction

is at the heart of institutional processing, as demonstrated. Infor-mally, success, or the lack of it, in maintaining smooth interpersonal relationships underpins every subsequent activity in employment, and is crucial both to the retention of jobs, and in the acquisition of satisfying jobs. Ruptured relationships are stigmatised. And stigma, above all, excludes.

In the following chapter, I shall be concerned with this primary level of interaction between hearing impaired employees and their co-workers (and to a lesser extent, relationships with supervisors and employers). It is from these critical small beginnings that the larger issues - covered in this present chapter and in chapter 6 - are manufactured.

NOTES

1. It may well be argued that in a recession, with a large pool of surplus able-bodied labour, why should employers bother? In the literature there is ample evidence attesting to the reliability of deaf employees at work. Effort may well be cost-effective. The other answer is a humanitarian one, which carries little credibility in times of labour surplus, and is increasingly being questioned: the 'right' of every individual to participate in the community via the institution of work to the full extent of his capacities. The social cost of withdrawing that sense of 'being with the living' is only beginning to be appreciated. For the hearing impaired, whether it be by unemployment or underemployment, deprived of that participation by 'deviant' communication skills, exclusion forms an integral part of their employment experience.

2. This is in keeping with the arguments of MONTGOMERY and MILLER (1977) and MITCHELL (1979). The amount of written communication required in any job, of course, varies. My argument favours the primacy of verbal over written competence. However, in the final analysis, for those discredited orally deaf respondents, it is literacy - or the lack of it - which may make a crucial difference between total 'outsider' status in the search for jobs, or marginal acceptance within the world of work.

3. Section 501 of the Vocational Rehabilitation Act 1973 requires all federal agencies and departments to submit annual affirmative action programme plans for the hiring, placement and promotion of handicapped individuals to the Civil Service Commission. However, the N.C.L.D. (1979) at Gallaudet argues this is something which has remained largely unfulfilled. Lacking precise standards for federal agencies to follow in designing and implementing such plans, "Such a rule should include goals and timetables for recruiting, appointing, placing and promoting qualified handicapped individuals". At the time of writing, this does not obtain.

4. Under s. 504 of the same Act, employers are required to make "Reasonable Accommodation" to a disabled applicant's handicap. For the hearing impaired this may include the use of interpreters, (under the 1977 Regulations), and TDDs if it would enable such a person to fill the job as competently as a hearing person. However, as MARGOLIUS (1975) argues, "Reasonable Accommodation" goes further than merely tailoring the job to meet the applicant's needs. It applies to "tangible concerns", including promotion, transfer and training.

5. Enquiries to the T.U.C. to find out details of membership by the hearing impaired elicited the following bland reply:

"Deaf people in normal employment are eligible for membership of an appropriate union like other workers and unions are also increasingly retaining and recruiting workpeople who are unemployed or on MSC programmes. We do not have specific figures for trade union members who are hearing impaired ...". The Assistant Secretary was unable to comment on why membership appeared to be so limited even within my small sample, and noted "we do not collect information" on the question of T.U. representation of dismissed hearing impaired employees at industrial tribunals.

CHAPTER 5: 'STICKING IT OUT' -
THE PROBLEMS OF JOB RETENTION

In the last chapter I illustrated the way in which more formal processing and official labelling combined to produce and perpetuate stereotypes about the hearing impaired and create a range of stigma reactions from personal rejection for specific jobs at interviews, to the denial of economic opportunities more generally. Room for negotiation of favoured definitions of self was seen to be fairly circumscribed in response to official processing, being restricted mainly to rationalisation, denial, or by-passing the system altogether where possible. And outcomes correspondingly reflected less considerations of communicative competence and salience of resources. Nevertheless, somewhat greater manoeuvrability was discernible as between discreditable and discredited respondents according to others' evaluations of their communication skills.

In this chapter, the negative evaluations with which departures from expected communicative competence tend to elicit are explored within the more elusive framework of primary, informal social relationships at work. IGNATIEFF (1983) referring to GOFFMAN's study of the inmates of total institutions (1961) comments perceptively on the "...immense possibilities of humiliation in the smallest human performance .. the degradation of people springs from the tiniest beginnings". It is with just such small beginnings in the particular setting of employment with which I shall be concerned here. I suggest that nothing illustrates more vividly both the uniformity with which the hearing impaired tend to be categorised, and the differential impact of, and response to, stigma and stereotyping.

A spectrum of stigma reactions, located at the moral, socio-psychological end of the continuum was apparent. It ranged from stickiness and unease, impatience, 'taking the mickey', to outright ridicule and ostracism. Some stigma responses affected almost all hearing impaired respondents, leading to deviant outcomes in the form of ex-

clusion from gossip, and social activities at work. In their more extreme form, they led to 'trouble' for some respondents, walk-outs or dismissals. Secondary deviant outcomes in the form of feelings of strain, inadequacy, loss of self-confidence and isolation were endemic. 'Sticking it out' was problematic for many respondents.

Stigma reactions varied and were differentially dealt with by discreditable and discredited respondents according to skills in oral performance. Salience of resources was also, to some extent, a factor affecting outcomes, although its importance lay more within the 'umbrella' framework of possession of skills in standard communication.

This informal processing, I suggest, mirrors fairly precisely the negative evaluations which speech deviations, the wearing of a prosthesis, and the use of sign language attract in social relationships outside employment. Somewhat more flexibility in strategy management was evident in response to informal than formal labelling, although the employment setting still circumscribed overall manoeuvrability. The hearing impaired having been identified as deviant, labels tended to remain. In this way the power of informal definers to obstruct is as pernicious and insidious as that of official labellers. It is only with a change of job that the possibilities of renegotiating status on a more radical scale become feasible again - and even these are determined by previous events.

Although 'sticking it out' was certainly perceived as a problem, a surprising number of respondents did actually retain their jobs, often for many years (cf. Appendix 2, Table 2c). This does not necessarily imply that perceptions of stigma and stereotyping modify with time. I suggest it reflects more the reciprocal nature of such bargains as may be struck which, although potentially fluid and dynamic, tend to become routine responses to dealing with the daily round of harassment of that particular job situation. In other words, adaptations to stigma have a tendency superficially to stabilise over time, obscuring the smaller undercurrents being negotiated. It is perhaps ironic that where strategy management was

most innovative - although not necessarily most effective in terms of desired outcomes - 'sticking it out' was seen to be most problematic.

Job stability across Communication Groups was as follows: 9 respondents in Group I and 5 in Group V had held their present post for over 7 years - some for a longer period. It was the 'marginal' respondents in Group III (and to a lesser extent in Groups II and IV) who had experienced so much job discontinuity as to virtually lose count of the number of jobs they had had.

At a time of tight labour competition, as noted, almost all respondents realistically appraised their limited chances on the dole queue, whatever the provocations suffered in their present posts. Within this general rubric, perceptions reflected the differing negotiating options available to respondents in the various Groups. For instance, Group I respondents were more likely to be in jobs for which their qualifications and experience had equipped them. Whilst, as will be shown, the possibilities of further advancement were generally very negatively evaluated, stigma reactions from colleagues and accompanying secondary deviant outcomes in the form of strain, isolation, loss of self-confidence, were generally perceived to be sufficiently 'liveable with' to deter respondents from risking the possibility of being unemployed.

Mr. N.M. (II) summed up his feelings: "You mustn't lose track of the normal likes and dislikes between people. It's not just a case of dislike between hearing and not hearing people... I'm holding my job, but it /deafness/ would be a handicap if I became redundant and had to change jobs".

The argument of COWEN and BOBROVE (1966) that those most severely impaired tend to be better adapted to their lot is much too simplistic if not inaccurate a speculation to explain the job stability of those in Communication Group V. (Miss M.A. apart). The fear of unemployment is very real. It masked, however, an equally real sense of discontent in many cases. Miss R.C. saw the situation thus: "Would find it very difficult if I had to go searching now .. No change. Feel safe where I am, but bored"

- a theme to which I will return.

In all three cases in Group III, incidents, rows, disrupted interpersonal relationships had been at least partially responsible for the many walk-outs and dismissals which appeared to characterise these respondents' employment careers. (The same applied to Mr. J.R. (II) and Mrs. S.T. (IV). Mr. H.H. commented: "Social acceptance is the problem. My face doesn't fit".

For this group of 'marginal' respondents, both biography and tension management are particularly salient in trying to sustain some kind of modus vivendi. The need constantly to re-define one's status vis à vis both a largely rejecting hearing and deaf world meant that bargaining and negotiation were a constant pre-occupation in their lives.

Despite the general surface stability, then, 'sticking it out' was emphatically perceived as a problem at the level of primary interaction with hearing work colleagues, and to a lesser extent, supervisors.

How one gets on with one's colleagues is critical in the actual sustaining of a work situation. As most interaction which occurs is on a face-to-face level with colleagues in the same or adjacent departments, (STUCKLESS, SINGER and WALTER, 1975), the importance of maintaining smooth interpersonal relationships is evident. However, it is here that speech deviations which violate interactional norms are most nakedly and ruthlessly exposed and exploited.

1. WORK COLLEAGUES AS UNOFFICIAL LABELLERS: FRIEND OR FOE?

Respondents themselves saw the maintenance of social relations at work as being one of the most difficult, if not insuperable, areas of management. Its crucial importance was well appreciated. Two respondents in Group I remarked in very similar fashion "If you can't get on with people you might as well stop at home" (Mr. C.R.).

Nonetheless, some discreditable respondents demonstrated considerable skill in handling interpersonal relationships at work, thus retaining some control over others' potentially devaluative judgements

of them. In a few cases (Mrs. I.Y., Miss P.L., Miss A.E. and Mrs. G.L.) social relationships were evidently no more problematic than they are between normally hearing people.

As noted earlier, it is a mistake to conceive of the process of stigma as being universally applicable. For respondents communicatively able to handle encounters socially at work, particularly in terms of 'acceptable' speech performance and a mastery of lipreading skills, it was the absence of stigma and a positive evaluation of their capabilities which were remarkable in their success. Mrs. C.O., for example, found she was drawn into the easy informality of her office. "We all know one another. We all help out. Dealing with the bottom-of-the-pile money-wise makes for closeness in the office".

Her communication deficit was well-concealed - possibly only her immediate supervisor was 'in the know'. Nevertheless, careful management was a necessary component to sustaining such easy informality: "You've got to be something of an actress. I've got to play a role at work .. it's sort of deception. I've got to prove that I'm as apt as them all the time. I won't go up to someone and say 'I'm hard of hearing' except in shops .. It means that I've got to work double hard all the time. But I don't want sympathy. I want to be accepted as a normal coping person".

The situational nature of deviance defining is illustrated by the equally exceptional nature of the perceptions and meanings of Miss G.F. (V). Despite her total inability to lipread and her grossly distorted speech performance, she found that the office atmosphere was her life-line to 'normality'. A positive evaluation of her other capabilities had enabled her to achieve the position of Co-Director of the small company where she worked. Only salience of resources can perhaps account for the absence of the 'spread' phenomenon so typical of the evaluations made of other discredited respondents - and of herself in other situations. She commented: "There's a lovely happy atmosphere at work. I've always made a lot of friends there. When they're new, they do avoid me. But it doesn't last long. When the ice is broken, it's OK".

She explained her strategy: "Most people have said at first they don't quite know what to do. If you smile and show you've got confidence, it makes you more approachable. You've got to project

confidence. Over the years I've got more confidence. It gets easier with strangers".

Socially, however, despite her robust, assertive personality, she was utterly and totally discredited amongst hearing and hearing impaired alike, as I was to witness for myself.

These, however, were atypical perceptions of how to handle stigma contests at work. For many discreditable respondents, it is often only by the judicious manipulation of situations, the careful exploitation of otherwise small, incidental circumstances, which help cancel out what might otherwise become 'false notes', and potential avenues for stigma. Miss B.G., for example, hinted at the almost enforced togetherness which a uniform dislike of the manageress fostered amongst her workmates: "As colleagues, we're closer together because of a dislike of the boss".

This tended to minimise the impact of other stigma responses to which she was subject, such as exclusion from gossip and information.

However, social relationships with colleagues more often presented problems for the hearing impaired respondents in this sample which no amount of manipulation or accommodation could quite repair. Stigma reactions such as unease and awkwardness, impatience and irritability occasioned by requests for repeats, often resulted from the kind of repeated interchange required at work which failed to subscribe to the expected rules of interaction. Restricted sociability, if not speedy termination of such encounters, tended to ensue. Once having experienced disruption, a work colleague is less likely to 'bother' again. The situation is, to some extent, sealed for that employment situation, thus lending some substance to the findings of FARINA and RING (op. cit.), CUNNINGHAM (op.cit), KLECK(op.cit) and others on the tenacity of stereotyping. Enforced proximity by no means necessarily modified peoples' stereotypes, as I shall demonstrate further.

Both discreditable and discredited respondents were subject to such stigma reactions. The ability to minimise ascriptions of deviance was

very largely a function of communication skills, so that at least notional acceptance by work colleagues could be sustained for respondents in Communication Groups I and II. For discredited respondents, however, communicative performance was evaluated so negatively that the unease and impatience, characteristic of responses to the former group, tended to manifest themselves in avoidance behaviour and outright ostracism.

2. STICKINESS AND UNEASE

The stickiness and unease, documented by DAVIS (1961) and HILBOURNE (1973), which characterises interaction between most impaired and 'normals', particularly those with facial or speech deficiencies, were seen to apply to relations between hearing impaired respondents and their work colleagues. The tendency to classify all hearing impaired respondents according to stereotypes of stupidity and gormlessness is a reflection of such awkwardness. It was a facet of interaction mentioned by respondents from all Communication Groups. The intensity of felt stigma, however varied, according to discreditable/discredited status.

Unease was often 'accounted' for in terms of the lack of appropriate guides for action once the taken-for-granted expectations of normality have been broken. Mr. C.P. (I) commented, for example:
"There's a tendency to .. embarrassment - uncertainty as to how to handle social relationships".

Mrs. B.C. (I) similarly 'explained' the disabling effects of deviant communication on other actors: "Hearing people don't really want to know. It complicates life. People haven't got time to spare for those less normal than themselves".

Other rationalisations: lack of understanding, fear, ignorance, difficulties of empathy with this particular handicap, - as with perceptions of employers' hiring practices - were the 'explanations' given by many respondents for the "stickiness of interactional flow" (DAVIS, 1961) such primary stigma confrontations tended to elicit. Even well-managed situational withdrawal, however, left Mrs. B.C. with a hint of a 'normal, but ..' status. As she explained: "I've man-

aged to bluff my way. I don't like to feel not normal. You can't keep saying to people 'can you speak more slowly'. So I sort of submerge into the background. I withdraw slightly in that I won't push my point of view".

This is in sharp contrast to her avoidance strategy following her stapedectomy* operation: "I went completely on my own. I avoided all academic parties. Now I'm trying to mix more. Making an effort. It is an effort".

However, neither respondent implied this led to a total disruption of encounters indicated, for example, by signing respondents.

Miss M.A., reflecting on her various jobs signed "Don't talk with other machinists. Awkward with me".

Like many other discredited respondents, she was often left severely alone. Thus, although I have stressed that stickiness and unease tends to be more characteristic of responses to discreditable victims, discredited respondents are also subjected to similar stigma reactions.

Given the difficulties of 'filling-in' to which any communication deficit gives rise, much of the unease and awkwardness and concomitant stereotyping and stigma in response to interaction with the hearing impaired focussed round the wearing of hearing aids (where visible), and the evidentness or obtrusiveness of speech incompetence. I will look at stigma reactions by work colleagues to both of these, reserving a discussion of the harsher reactions provoked by the overt use of sign language until later.

(a) "I feel deformed wearing one"

Ample evidence attests to the strength with which hearing aids were perceived as stigma symbols, thus posing a threat to sociability. Illustrative of the lengths to which some respondents are prepared to go to avoid having to expose to public scrutiny the wearing of an aid is Mr. B.S. (I).

Born in Burma, his hair is clipped in traditional South East Asian style, making concealment impossible. He thus refuses to wear his aid,

even though it would enable him to function appreciably better. He
* Removal of the stapes - an operation designed to cure otosclerosis, one of the most ~~common conditions~~ responsible for conductive deafness.

commented: "I try my best to cope without it. If I wore it at work they might think I'm a bit thick".

Passing was literally a way of life. Biographical management of his past and on-going tension management to conceal his current 'imperfection', as argued, conceivably does more to solidify his self-concept as deviant than recourse to any other strategy. It achieved the kind of role primacy more usually associated with role engulfment. He engages in the most convoluted manoeuvres to avoid being caught out, resorting to strategies such as "I'll say 'I'll have a word with you next time', or I'll just shake my head vaguely - it could be either 'yes' or 'no'. Or I'll say 'Did you say something? I was miles away', or 'I didn't quite pick up what you said. I've got a bad cold".

He confessed "I live by my wits". Similar to the devices employed by illiterates, he remarked "If I was really caught I'd smash my glasses".

The concealment of aids was widespread. 6 respondents from Communication Group I resorted to the careful styling and growth of hair. Mrs. A.B. remarked "I try to conceal it. I always keep it covered". Indeed, so successfully are her two aids concealed that, even working with her for some appreciable time, I was quite unaware of her considerable deafness.

Unease with hearing aid users is additionally attributable to the mythology surrounding them. At one extreme, they are regarded as 'cure-alls' in the same way that glasses are regarded. Thus irritability occurs if the wearer still 'affects' not to hear. Stigma responses of disbelief "We're all a little bit deaf sometimes, aren't we?" (to Mr. S.L.) were felt as intensely galling. At the other extreme, unease exists from the ambiguity, noted earlier, which the sight of a hearing aid produces. It gives no indication of either the severity or extent of the defect, nor of the efficacy of the aid¹.

However, not all aids, if worn, can be effectively concealed. Felt and enacted stigma were perceived by Mr. A.E. who also avoided

wearing an aid wherever possible. His acting career was not necessarily conducive to sustaining a long hair cut. He commented: "Just looking at a hearing aid the immediate response is 'oh, problems'".

Although by no means a universal response (witness the assertiveness with which Miss G.F. wore hers), it was generally felt that any benefits accruing from amplification were heavily counterbalanced by strong feelings of dislike, shame, and embarrassment, and were perceived to contribute significantly to unease and awkwardness of interaction, both at work and socially.

(b) "When they hear my speech, they're speechless!"

As argued, it is above all reactions to incompetent speech which tend to be negatively evaluated and generalised outwards as indicative of incompetence in every other sphere of activity. This was vividly illustrated by Mrs. G.L. who commented of another mutually known respondent: "I didn't realise what an intelligent person B. was at first .. You would probably downgrade her because of her voice .. The first impression you have of someone is their speech".

I noted in Chapter 3 how the ability to monitor one's speech, its pitch, intonation, rhythm and articulation is a crucial factor in deflecting stigma reactions. In addition, as with some of EDGERTON's retardates, illiterate speech, the inability to pronounce certain words correctly, or lack of knowledge of some vocabulary altogether, reinforce any difficulties of modulation and immediately mark one out as 'incompetent'. At work, speech performance is critical in determining whether one is defined as discreditable or discredited.

Incorporation of dominant values concerning the primacy of 'standard' speech skills illustrated the anticipation of unease and ascriptions of stupidity with which 'defective' or minimal speech is greeted. Only signing respondents tended to reject these values concerning the primacy of speech, but, as I shall demonstrate later, fluency in sign accorded its users neither the respect nor acceptance at work which

they were accustomed to expect within the deaf community. At work, it was not only an irrelevance, but often an additional source of stigma.

The preservation and maintenance of intelligible speech was thus a continuing pre-occupation for respondents at work, particularly those in Groups I and II, and discredited respondents who wished to locate themselves in the hearing world. One illustration may serve to highlight the tenacity with which this was pursued: Miss C.G. (II), profoundly prelingually deaf, had been forced by her parents to speak from early childhood - with commendable results as far as ease of interaction with hearing people was concerned. (Salience of resources was certainly operative here. Commercial hearing aids, private tuition in speech training were the best that money could buy). Miss C.G.'s perceptions of this enforced oralism were very positive: "Talking, talking, talking .. It may be harder, but when you're older you know how to behave in the hearing world, particularly at work, without too much loss of dignity. I've got the proper social skills".

Respondents in Groups I and II had, on the whole, evolved strategies for ensuring that their speech was under control. Miss V.G., for instance, a primary school teacher, said "If I have problems modulating my voice, I ask one of my pupils to sit at the back of the classroom and make hand movements if it's too loud or soft".

But the worry and anxiety over quality of speech, and its effects on relationships at work, were by no means absent. Of those discreditable respondents who conceded it gave rise to anxiety (9 in Group I and 5 in Group II), Mrs. A.H. perhaps illustrates best the worry it caused her: "It's sometimes very loud. I couldn't always modulate it at work .. what with other noises. People stared".

Some signing respondents apart, it was also in Communication Groups III, IV and V where pre-occupation with the quality of speech was as marked as in Groups I and II, and where the chill of others' incredulity and subsequent avoidance occurred most often. Awkwardness here took on a rather different dimension in that without speech, interaction was totally precluded. Discredited respondents, particularly

the signing deaf, are known to be reluctant to use what 'voice' they have because of the reaction it provokes - a point poignantly highlighted in the play "Children of a Lesser God".

Miss R.C. half-wrote, half-signed how she felt: "When I talked with hearing people I was nervous and /un/self-confident to talk them and can't speak well. Have to write down. I felt my voice pulled down inside and can't speak properly. I always use with deaf people all the time. I am alright with them and easy communicate with deaf".

Thus deviations from expected communication skills, particularly relating to speech performance, disproportionately give rise to unease within the work situation, if not to more extreme reactions as we shall see later. Two respondents, one successfully surmounting imputations of deviance, and the other coping less effectively, illustrate this process.

Despite capitalisation on her deviant status, general awkwardness and unease were seen to characterise the relationships Mrs. N.F. had with her new social work colleagues. Whilst her mastery of sign carried a certain kudos, the very evidentness and obtrusiveness of her communication impairment incurred other penalties for challenging the stereotypes the hearing majority have of the generalised incompetence of the hearing impaired. Mrs. N.F. was, in a sense, doubly sanctioned - for being 'incompetent' as far as hearing norms regarding speech were concerned in the first place, and for having the effrontery to challenge imputations of its master status. She commented: "Although I get respect in my Department I've had to fight for it .. some social workers are uncomfortable with a handicapped colleague. There's a lot of 'them' and 'us'. They find it difficult to accept handicapped people as equals - colleagues. Some have very preconceived ideas about handicap".

This represents a rather unique entrée into the perceived meanings of those official labellers whose interaction with others is at the level of helper/client. Mrs. N.F. has positively demonstrated her ability to do a job commensurate in status with hearing peoples' achievements, thus posing a profound threat to the value system on which

stereotyping is based. Working with hearing colleagues in a hearing environment, her professional commitment as a social worker for the deaf cannot quite be relegated to the status of "laudable but hardly challenging" (CRAMMATTE, 1968) with which full immersion in work with the hearing impaired might be dismissed. And again, it attests to the reluctance of common-sense knowledge to yield to more positive images of the stigmatised, even when the challenge is sustained over time.

At the same time, Mrs. N.F. has become adept at dismissing any residual, covert ascriptions of deviance from tainting her self-image at work. A robust discrediting of her discreditors has enabled her to preserve her work (as opposed to her social) identity relatively immune from the subtle imputations levelled at her. And as a one-time client herself, her observations additionally bear out some of my arguments in Chapter 4. As she remarked: "I've rarely met a psychologically well-integrated social worker .. I think some so-called professionals make clients exhibit the symptoms they're looking for .. I can do what other social workers do standing on my head. I'm better read than many of them. And I've an inside knowledge of deafness".

Whilst the unease and stickiness experienced by Mrs. N.F. might be regarded as a penalty for relative success, Mr. H.H. (III) was penalised for his failure. His relationships with his hearing work colleagues might best be described as a 'permanent running sore'. They were doubly complicated by problems of biography and tension management in both hearing and deaf worlds. He, too, illustrates the difficulties involved in trying to impose more favourable definitions of self in the face of sustained interpersonal awkwardness and unease. His speech is flat, 'affectless' and punctuated by 'oddities' in syntax, reflecting his use of BSL.

Prelingually partially deaf, he is struggling to master written and spoken English and is in the process of taking an Open University course in Chemistry. Brought up entirely within the deaf culture, and married to a signing deaf wife, he is the classic example of the

'marginal man', straddling both worlds and at home in neither. Bored at Deaf Clubs because of lack of interest in his career ambitions, he has learned to keep quiet about them. The stress on individualism is at variance with the norms of collectivity and social cohesion characteristic of the deaf culture. At the same time, acquiring the 'success motif' perhaps too late in life, he is not accepted into the hearing world either, his speech performance being so much at variance with accepted norms, and suffering 'stigma-fall-out' from his signing wife.

He perceives the tension involved as follows: "In hearing company I feel at great unease and particularly in work places where they can be demanding at times ... I am on edge with tiredness and splitting headaches".

At Open University functions, such is the awkwardness generated if accompanied by his wife, they are both virtually ignored.

He acknowledged that his attempted penetration of the hearing world, - the interest and attainments of which he admires - involved some denial of his 'deaf' self, but remarked philosophically: "One finger deaf, four fingers hearing. What do I do? Wait for the deaf to get up and do something?... I grew up with it, trying to live in two worlds. Hearing expect you to be the same, therefore they don't feel easy when you can't keep up with them. You get a feeling of schizophrenia".

The phenomenon of strain cannot, as BRIEN (1983) has suggested, be seen as having applicability only to the hard of hearing. His desire for acceptance in the hearing world, however, also involved a careful monitoring of the use of sign language. At work, it was scrupulously avoided, apart from the one occasion when he and his wife were employed together, when they 'conversed' in sign overtly - to his cost.

Awkwardness and dis-ease, although shown to straddle all Communication Groups, are particularly characteristic stigma reactions to those respondents located marginally between the two worlds.* Nothing can be taken for granted in encounters with either. Common-sense meanings and shared understandings on which people rely are constantly being breached by untoward 'false notes'. Confronting the hearing world, however, Mr. H.H.'s speech performance had serious stigmatising

* In a wider sense all hearing impaired are marginal to the wider society in ~~that they are~~ essentially 'outsiders'.

effects on his relationships with colleagues at work and his employment career generally. As he himself commented "Relationships with work colleagues have been poor in the past. Hearing colleagues - strange people. Deaf people have a different way of saying things. A lot of younger hearing dislike deaf adults. 'They're not fit to run' is the attitude".

Generally, however, fairly implicit awareness was shown by respondents of the responsibility they were forced to carry in "disabling the normal" and disrupting normal, taken-for-granted ease of interaction in the work situation. Hence the attempts to conceal the wearing of hearing aids, to reduce dialogue to a minimum if speech is in any way slightly discordant or bizarre, and to avoid the overt use of sign language.

Thus strategy management in response to unease and stickiness was, as surmised, highly dependent on the acquisition or preservation of skills in communicative competence. Passing, occasionally with the help of 'someone in the know', or, more routinely, normalisation techniques appeared to help neutralise the more damaging impact of being categorised as 'difficult' or 'odd' by other hearing work colleagues. As in the case of Mr. H.H., however, where speech incompetence was obtrusive and salience of resources unable to compensate, unease manifested itself in harsher terms. Strategy management options for the imposition of more favourable definitions of self were proportionately reduced. The perceived effects of minimal or non-existent speech will be dealt with later.

3. IMPATIENCE AND IRRITABILITY

Closely allied to any discussion of unease and awkwardness is the equally pervasive stigma response of impatience and annoyance. In varying degrees, all hearing impaired respondents violated the anticipation of a relaxed interchange, the opportunity for a 'breather' which so often dissipates the tension of a work environment. However, any evidence of tolerance by hearing work peers was conspicuous by its absence.

Repeated experience of irritation shames and humiliates, denoting that lack of acceptance which is characteristic of the stigmatised.

The notion of levels of tolerance to varying degrees of departure from 'normal' communication is a useful vantage point from which to view stigmatising behaviour in response to the difficulties which lipreading inevitably brings in its wake. It was primarily a response directed towards discreditable respondents endeavouring to rely on this, but still able to monitor their expressive communication, and the discredited orally deaf struggling to enter the hearing world by the only available route open to them.

Irritation was particularly evident as a stigma reaction to the problem of repeats. Missing key words or phrases and having to ask others to repeat what has been said confronted hearing impaired respondents in this sample with a constantly recurring problem. That it was often handled with delicacy and tact by respondents in an attempt to avoid provoking irritation was usually at the expense of understanding. A constant balance has to be maintained between the desire to hear what has been said, and the probably provocation of irritation by an insistent request for repeats, particularly when the remark may have been only a triviality. Mr. P.E. (I) caught the Catch 22 situation nicely: "I daren't ask for repetitions. So I tend not to listen to gossip. Then people get irritated if you haven't heard what's going on".

The anticipation of annoyance and irritation most commonly led to a resignation that much, if not all, of what is said will be lost - with concomitant secondary deviantising in the form of an acute sense of isolation and exclusion. Miss A.L. (V) with no lipreading skills or amplification to aid her total deafness said with quite unintentional pathos: "You just sit there smiling and hope you're smiling OK". She added "Sometimes I get into conversation but you can't keep asking what they're talking about .. Sometimes I feel more like concentrating than others. You get very tired when you're deaf".

The apparent role engulfment in her discredited status was mitigated - at least to outsiders - by the production of a collection of photographs taken at work 'do's', demonstrating incontrovertibly to her her continued acceptance by work peers. Other remarks during the course of the interview, however, revealed her intense feelings of isolation at work.

Strain - 'Managing a Front'

What is apparent from this extract is the salience of strain as a critical factor in 'managing fronts'. WEINBERGER (1978) has defined strain as "...anything which prevents a system of relationships from approximating integration".

As with the case of Mr. H.H. referred to previously, it cannot thus be confined to the understandings of the postlingually 'hard of hearing'. It was perceived as an all too familiar part of trying to manage interpersonal contacts by both discreditable and discredited respondents, faced with a hearing environment. It is not just a question of, for example, postural tension involved in trying to lipread. It is part of the much more general problem of biography and tension management, which, as GOFFMAN argues, are indispensable elements in potential and actual deviantising. To suggest that strain means very different things to discreditable and discredited respondents is to confuse the issue: the difficulties of biography management, purportedly the problem of discreditable victims, also, I suggest involve the strain and tension of discredited subjects, as HOPKINS and SCAMBLER (1976) noted of the epileptic subjects they studied.

All respondents in Groups I and II relied on speech, the use of such residual hearing as they possessed, varying degrees of competence in lipreading, and the use of hearing aids to carry them through a working day. The sheer fatigue of doing so, and the impatience mistakes tended to elicit, were frequently mentioned. The situated nature of deviance defining is important here. Social encounters outside

work are of variable duration. Concentration at work has to be sustained generally throughout an 8 hour day. Mrs. C.O. commented on the feeling: "At the end of the day I can't take any more. The strain of lipreading is terrific. You have to work double-time... The first thing I do when I get home is take of the aids and sag. Like a woman taking off her corsets and scratching herself!"

Mr. E.B. commented on the ramifications this had for the attainment of interaction at all. "You won't find deaf people the most relaxed people to be with. You can't be relaxed. You have to think all the time; think what you're saying, think what others are saying, think what you're doing in relation to what you think they're saying".

This is, of course, in painful contrast to the sense of release from strain experienced within the protective confines of the deaf community by signing respondents. However, strain immediately manifested itself in confronting the hearing world of work for these respondents, as it has done for the discredited orally deaf subjects.

Thus, the visible wearing of a prosthesis, the difficulties involved in constantly monitoring biographical information and tension control, and the strain inherent in trying to keep abreast, however inadequately, with what is going on, add appreciably to the impact of stigma responses arising from the violation of norms of communicative performance. Whilst impatience probably does tend to be a characteristic response to 'gaffes' in lipreading, irritation is by no means confined to discreditable respondents. The responses of Mrs. E.I. (II) and Mrs. D.S. illustrate the similarity of reaction to the oft-applied soubriquet of 'dummy'. Mrs. E.I.: "You're straining to hear. It makes you look gormless .. Sometimes I get my sentences jumbled. People at work try. They say 'we know what you mean'. But all the time they're thinking 'oh, she's a bit slow'".

Exasperation equally attended Mr. D.S.'s attempts to understand. His mother remarked of D: "People say he's not trying hard enough. It's a case of 'oh, hurry up. Oh, why can't he hurry up and understand'. It has hurt him in the past".

Strategy management tends to be geared to an outward acceptance of deviant status in response to these stigma reactions, whilst dis-

creetly trying to repair the repeated assaults on self-esteem. The constant struggle to keep 'au fait' with on-going information, and the stigmatising effects of exclusion from it, will be dealt with later. Attempts at re-definition of self often had to take place in other contexts. Mr. E.B., for instance, illustrated the way in which any spontaneous reaction to the expression of annoyance or irritability on the part of hearing people, he felt, had to be firmly suppressed. Otherwise, lack of control in this respect could lead to incidents and 'trouble' (as I shall discuss later). "They can be irritable with you. You must never be irritable with them. You feel you are thanking them for bothering about you. Some of my work colleagues think I'm temperamental. The deaf aren't allowed to be temperamental. I get told off for being too aggressive".

It is the anticipation, as much as the actuality, of imputations of deviance which tend to have this self-fulfilling function. To the extent to which stigma reactions of stickiness and unease, irritability and annoyance are internalised, and a re-definition of self as shameful materialises, other secondary deviant outcomes - isolation, feelings of inadequacy and lack of self-confidence - are likely to assert themselves. As with strain and tension, they tended, in varying degrees, to affect most hearing impaired respondents in the sample (and will be discussed later). Again, much depended on the ease, or lack of it, with which such imputations could be minimised, neutralised, rationalised, or disavowed by the exercise of skill in communication performance.

4. MANAGING STIGMA AT WORK: SOME EFFECTIVE TACTICS?

Apart from Mr. B.S. passing was rarely a strategy which could be sustained long in work relationships, even with effective concealment of hearing aids and minimally evident departures from 'standard' communication skills. The careful advance monitoring of situations and encounters with work colleagues to minimise the threat of disclosure is simply not practicable within the very public framework of employment. It is also an extremely cumbersome device and, as indicated earlier, ensures con-

timous pre-occupation with, and reinforcement of one's image as a deviant, shameful person. However, 6 Group I respondents felt they managed to pass for some of the time (Mrs. B.C., Mrs. A.B., Mrs. C.O., Mrs. I.Y., Mr. S.W., and Mr. P.E.), but for many work situations, passing was generally used in combination with various normalising strategies, a few examples of which I shall describe.

(a) Playing the buffoon

The use of humour is a particularly effective device in neutralising both awkwardness and irritability. Ironically, skill in its use depends on the preservation both of expressive communication skills, and a shared understanding of a hearing person's sense of humour, to which effective 'standard' communication gives ready access. This is not an option available to discredited respondents with 'deviant' speech performance.

For hearing people, the appreciation of humour tends to be largely verbal in nature. As NASH and NASH (1978) comment: "... joke telling is a regular source of amusement, not so much for the content, but because of the way the story is told and the length of time needed to tell it .. The joke becomes funnier to the hearing because time is 'fouled up'".

It is often the long played-out recounting of a story, with appropriate pauses and digressions to build up to the final dénouement which give hearing jokes their piquance.

For visual humour to be effective, it often demands the special talents of a Marcel Marceau. Signing humour often 'back-fired'. No hearing co-workers in this study had even rudimentary sign skills. Jokes told in sign are often impossible to translate, as the idiom is so different. The possibilities for incongruity between visual and verbal humour are widespread. And distortions in meaning are heavily sanctioned.

Discreditable Miss P.L., however, showed a lively awareness of exploiting the possibilities of hearing humour, thus counteracting im-

putations of stigma and 'enabling the normal'. She described her success:

"I've taught people I've worked with to laugh at my deafness as (sic) they aren't discomfitted. At the same time I know they don't really understand ... Another guy, he's a deaf colleague, we put our two deaf ears together and say 'pardon? pardon?'. It's a huge joke in the office".

Playing the buffoon, the accepted stereotype of the 'deaf', does have its hazards, and great care has to be taken in the selection of an appropriate audience for such a display. Salience of resources as well as communicative competence also characterised the success of Mr. N.M.'s performance. He was able to use his professional status as a sales executive and ebullient personality to turn a potential office furore into a joke. After the trauma of being recently adventitiously deafened, when he could, potentially, have been a candidate for discredited status, he recollected: "When I first lost my hearing I was doing a lot of shouting. Everyone at work was shouting and going home and shouting at their husbands and wives. It became a joke. The Director brought me a copy of 'Winter Weekend Breaks' and said 'How about having a nice quiet weekend!'"

Additionally, he had apparently been whistling to himself without being aware of it. "My colleagues asked me if I realised I was whistling. When I didn't, everyone laughed".

For discredited respondents, Mr. D.S., with no speech and functionally barely literate, was the only signing respondent to capitalise on an appreciation of '~~slipping-on-a-banana~~ skin' type of humour. It was a shrewd assessment of the one kind of visual humour generally appreciated by hearing people. He has what he calls "joke-fights" at work. "Not nasty. When you don't understand, they have a good laugh".

His pleasant, sunny disposition may well have additionally accounted for the general lack of abrasion and incidents characteristic of some of his signing colleagues at work. As his mother commented: "D. always seems to make it all right with people".

(b) Avoiding the Avoiders

However, such was the power of anticipated dislocation of relationships from the stigma reactions I have discussed for some discreditable respondents, anything even approximating to a social life at work was perceived

as hardly feasible. Mr. C.R. (I), even though far from being evidently handicapped conceded "I have no social life outside the family" and to having "only acquaintances" at work. A life-long habit of social withdrawal from anticipated discrediting was in the nature of a self-fulfilling prophecy. Feelings of social isolation at work, as a secondary deviant outcome were firmly entrenched. At the same time, dissociation and rationalisation were often employed in tandem, enabling respondents both to head off anticipated avoidance of them by others, and to retain a grasp on their self-esteem and preferred definitions of self.

So Mr. S.G. (II) stressed that his 'anti-sociability' was as much a personality trait as attributable to his deafness, his only admission of loneliness being "You sometimes get downhearted because you can't pick up things as you should".

Otherwise, he firmly rationalised his avoidance. "I'm looking after the machine .. I don't really mix. If there's talking to be done, say, to find out something, I'll ask .. When I'm doing the job I've got to concentrate that much harder I can't worry about what's going on around".

It was a tactic similarly employed by Miss C.G.

(c) Looking for Protective Cover

The protective function of industrial noise served to preserve the illusion of comradeship for Mr. W.G. (II). "With the machines running, as people are all shouting I'm not left out. I feel shut off only when I go to the loo. I'm dead as soon as I go out of here. Work's my saving grace"*.

Again the illusion of comradeship could be sustained in the company of other stigmatised groups at work. Social contact often appeared to fare better with other 'marginal' workers. As racial and ethnic minority groups share many of the same kinds of devaluative experiences as the hearing impaired, minority groups evidently seek each other out for mutual support in an otherwise potentially or actually hostile environment. Both Mr. N.C. and Mrs. B.L. (IV) had found protection against

* Employed for 25 years as a line-setter, he was well aware, but resigned to the fact that industrial noise had largely contributed to his hearing loss. The question of claiming compensation had not occurred to him. Neither was it something he wanted to pursue.

stigma reactions by 'clubbing together' with black or Asian workers.

As Mr. M.C. commented "I'm closer to coloured workers than white. They accept my deafness more than white hearing people .. When I was moved from the City I felt more left out because no coloured workers. Now I'm in Acton the staff are 50:50 Indian/White. I have lunch with Indian workers".

Unfortunately, however, this tends to accentuate differentness. 'Stigma fall-out' encompasses both devalued groups to the further detriment of both.

The chief limitation of normalising techniques, namely the refusal of others to go along with them, was illustrated vividly by Mrs.

E.I.: "You can get by so far. But then people tend not to believe you. They think you're trying it on. Or sometimes you can patch up a conversation. Maybe you get the tail end of it. With people you know at work, you get laughed at if you get it wrong. But others think you're stupid. It can lead to embarrassment and ill-feeling".

With decreasing competence in communication skills, options for strategy management increasingly narrowed; at the same time, stigma reactions were correspondingly more severe. These will be discussed in a further section. First, I propose to look at some of the major deviant outcomes to stigma reactions of unease, stickiness, impatience and irritability: namely exclusion from access to gossip channels, jokes and banter, and from participation in the small, but vitally important social rituals of pub or canteen lunches, tea and coffee breaks, games of cards. Such exclusion is reflected in the reduced quality of social relationships at work, and was responsible for many of the secondary feelings of lack of self-confidence, inadequacy, anxiety and isolation. In varying degrees, respondents from all Communication Groups were affected.

5. SOME STIGMA OUTCOMES: "IT'S NATURAL, ISN'T IT"

As with other aspects of containment discussed in Chapter 4, exclusion socially at work may seem to be a 'natural' outcome, and intrinsic to the nature of the impairment itself. To an extent this is

so, and it would be idle to deny - as some labelling theorists have tried to do - the 'objective' reality of what is defined as the deviant condition. Difficulties in picking up the often unpredictable and fast-changing topic content of gossip, for example, or group chit-chat, are part of the continuing dilemma of lipreading in other than a one-to-one situation.

My contention, as discussed in Chapter 3, is that along with other so-called 'obstacles', it is the breaching of norms of interaction by deficient speech performance which is itself stigmatised, as well as its ramifications. Stereotyping - the uniform classification of those handicapped by varying degrees of communicative deficiency which impinges on something so basic as ease of interaction - is the prior factor.

Any 'obstacles' or 'outcomes', as noted in Chapter 4, are then rationalised and legitimated as 'insuperable' and justify the absence of any effort to overcome them. The use of finger-spelling the odd word (easily learnt) to give a clue, or 'filling in' after a group discussion, for example, were conspicuous by their absence. And the 'outcomes' themselves produce further deviantising.

The few cases where stigma has not been universally applied (Mr. N.M., Mrs. N.F., Miss G.F.) attests to the fact that so-called 'obstacles' are by no means insuperable. As noted, even in the face of evidence to the contrary, the very fact that they continue to be perceived as such by the vast majority of hearing colleagues and employers - not to mention, at times, respondents themselves - lends substance to my argument.

(a) Being by-passed: Gossip as a social ritual at work

Exclusion from participation in gossip affected respondents from all Communication Groups. Few, even though professing to enjoy gossip at work, found it totally without strain (Mrs. I.Y. possibly excepted).

Reactions represented a whole range of strategies. Quite often rationalisations were employed - that gossip was intrinsically boring, not worthy of attention, or that, regardless of hearing impairment, respondents would not have participated anyway. Face-saving techniques were those confined to somewhat futile attempts to normalise (ie. 'participate' even though little was heard and understood, in return, perhaps, for the illusion of 'getting on with one's workmates'); denial and rationalisation, and withdrawal.

5 Group I respondents had recourse to the face-saving device of "I find it irrelevant. I don't enjoy chit-chat anyway" (Mr. B.U.); or "I'm a loner. I'd be concentrating on what I'm doing" (Mr. B.T.), thus enabling them to repudiate any imputations of undesirable differentness. Strategic withdrawal from this particular situation characterised the response of Miss P.L.: "I can participate. It's only a strain in noisy surroundings ... But if I met a couple of people at the photocopying machine, I wouldn't make an effort to join in".

Several respondents illustrated the practical constraints on gossiping whilst working, but it was Miss C.G. who was most aware of the social penalties this incurred. As she remarked: "I work in a big room. I either work or talk. I can't do both. I may appear to be standoffish to people. But I cannot afford to have an ear cocked to general gossip ... There's a slight lack of camaraderie as a result. I'm seen as too cold or too precise. But it's the only way I can get anything done. It's a case of concentrating on one thing or the other".

For other respondents, the question of participating in gossip hardly arose. Discredited respondents were rarely included. Choice in the matter had been pre-empted. Any sustained, or even sporadic efforts to ensure their participation in one of the small social rituals which give piquance to a work routine were rare. Exclusion was simply an 'automatic' consequence of being adjudged communicatively deviant. Yet participation in gossip is, as BECKER (G., op.cit) notes, a form of "social glue". It is one of the chief means of cementing and keeping alive such work relationships as exist, and maintaining a sense

of belonging to one's environment. However much one may dread being gossiped about, this does nothing to prevent the normally hearing engaging in the activity. To be thus excluded gives some indication of the power of informal means of social control exercised by hearing colleagues.

Generally, there was little discredited respondents could do to neutralise the damaging impact of such exclusion. Nevertheless, as GOFFMAN (1961) noted of situations which are not totally closed, ".when an individual must accept circumstances .. that affront his conception of self, he is allowed a margin of face-saving reactive expression - sullenness, failure to offer the usual signs of deference, sotto voce profaning, or fugitive expressions of contempt, irony and derision".

Thus Miss R.C. and Mr. D.S. managed to discredit the discreditors, at least to their own satisfaction, by commenting reprovingly on the way gossip was allowed to interfere with hearing peoples' concentration on their work. In an attempt to neutralise his sense of isolation on the assembly line, D. signed to me: "Others gossip. I think hearing lazy, stupid. Always gossiping!"

Enacted stigma - the feeling of employers 'cashing in' on such a deviant outcome and exploiting it was commented on by only one respondent. Mrs. P.K. saw the exclusion of the hearing impaired from participation in the gossip network as a decided advantage which was capitalised on by employers: "If there's a job and boss wants it cleared and done, give it deaf 'cos they know they ain't gossiping. That's why employers like deaf at low jobs".

(b) Exclusion from lunches, coffee and tea-breaks

Quasi-accommodation, or outright exclusion from sharing in lunch-breaks, coffee and tea breaks, and the odd excursion to the pub, underlined the non-acceptance of most hearing respondents. As a deviant outcome, it signified deterioration in social relationships. Again, this took place along a continuum of rejection, according to communicative competence.

Similarly, rationalisations, or "accounts" were commonly used to explain any perceived social solecism of not joining in. Mr. P.E. and Mr. B.U., for example, resorted respectively to explanations of "being a loner" and "it's a personality thing" to excuse any absences.

Otherwise, as with gossip, the pattern was either one of avoidance of the ritual of shared lunch breaks altogether (or of being avoided). For some discreditable respondents, simply being there, regardless of whether anything is heard or understood, constituted the maximum tolerance level shown and provided the illusion of sociability. Mr. W.C. commented, for instance: "I do go to the pub at lunch time but I wouldn't say I understood much there".

The difference between the ability to choose to avoid - an option available to discreditable respondents - and imposed choice, where options are decided for one (the lot of many discredited respondents), is nicely illustrated by Mr. S.G. (II) and Miss R.C. (V), both using the same covering device, but in response to different degrees of pressure. Mr. S.G. was still able to exercise choice in avoiding the ritual without incurring overt sanctions: "I don't really talk much in the canteen because I can't hear what's going on. I get a paper and read that". Miss R.C.'s recourse to a book was dictated as much by necessity as choice. She signed/wrote: "Eat alone. Read a book. When they/colleagues/ talk don't ask me to join in".

However, the hazardous nature of either voluntary or imposed avoidance of this particular opportunity for the exercise of expected sociability is evident. Exposure to being on one's own in a works canteen places respondents in a particularly vulnerable position. Their 'differentness' is accentuated - even for discreditable respondents. This may, in itself, set off a further train of stigma reactions. "Accounts", excuses or explanations available to respondents in casual social encounters will not pass muster at work where a respondent is known.

The variability of the impact of stigma has been commented on in other connections. Whilst communicative competence is the overriding factor in determining its management, the salience of personality and other resources emphasises the interdependence of psychological and sociological responses. Thus the effects of deprivation of the little rituals which often enliven mundane, routine jobs, or cement relations in others, sometimes varied from respondent to respondent, even where communication skills were fairly comparable. Thus Mr. B.T. (I) remarked of his job: "You've got a group playing cards. But they'd never bother with me. I don't understand why. It never used to worry me. I've got a thick skin".

However, for Mr. S.L. (II) during his pupillage, when his hearing loss became increasingly manifest, the inability to share in 'taking tea' whilst the jury is out, was very painful to him. Relationships with his fellow-barristers had deteriorated to the point where he commented: "I couldn't make friends with the other barristers at tea-time ... I had to sit in silence. It makes you look such a fool". Dialogue, the exchange of ideas, the thrashing out of argument and counter-argument, had been his life. Going over the day's cases at tea was standard practice at the Bar. The sense of both felt and enacted stigma occasioned by this deprivation was strong.

Suffering the lack of invitations to join in at lunch or tea-breaks, and exclusion from the leavening effects of gossip were generally the lot of most discredited respondents. A dull acquiescence or a 'shrug' response were characteristic. Mr. G.C. (V) signed: "In staff canteen, used to it /being alone/".

He contrasted this with "outside ..where Group together and sign away".

It represented the extreme end of rejection by his work colleagues. Although the verdict was nominally accepted in that bargaining for more favourable definitions of self in this situation yielded negative results, and the frameworks within which negotiation could take place had solidified for this particular work 'happening', role engulfment

however, was not total. As noted previously, Mr. G.C., after a period of apparent quiescence was 'on the move' in other directions.

(c) Missing out on Jokes

Finally, being excluded from sharing in jokes, banter and fun, (cf ROY, 1976), although not specifically asked about, was mentioned spontaneously by a few respondents as a keenly felt deprivation. It, too, contributed much to the sense of isolation and loneliness which is a feature of relationships between hearing and hearing impaired at work. Similarly, it deviantises in itself.

It was often a question of jokes badly misfiring, in contrast to the deliberate use of humour as a neutralising device discussed earlier, reinforcing already existing stigma reactions of unease and impatience. Exclusion affected respondents from all Communication Groups. Miss B.G. (I) was particularly sensitive to the way exclusion - whether deliberate or inadvertent - could lead to interpersonal friction. "I miss confidences. Funny gags. It makes me tactless sometimes", she noted.

Mr. E.B. was similarly conscious of what is the sequential nature of deviance defining, where the deviant outcome of exclusion from jokes can precipitate further interpersonal abrasion. At first interview he commented: "I miss out on jokes. I'm completely cut off". In a later letter, he expanded on this. He described an incident at work involving a practical joke, which had misfired, leading to all-round resentment. He wrote: "It seems after I'd been duly censured that the others, though having more interesting work or machines, are sometimes bored and, so my boss told me, would go round the twist if there weren't any practical jokes to play. It's worse for me, since I can't hear the radio or gossip to the same amount, but I don't spend my time playing or thinking up practical jokes. 'One law for the hearing, another for the deaf here perhaps'. Not that I've ever been told not to play practical jokes (perhaps I'm not that type) but since I get the boring work I'm tired and ill-disposed to hear about the boredom of hearing people".

In looking at these three examples of stigma outcomes, the pervasiveness of the cultural stereotypes which, I suggest, gives rise

to such outcomes in the first place, is a feature of the lives of most hearing impaired respondents. The insidious power of informal labellers, ostensibly the status equals of their hearing impaired colleagues, to define and defile is clearly evident. 'Sticking it out' under such circumstances is rendered very problematic. Both felt and enacted stigma were apparent, across all Communication Groups.

(d) A Self-Confirming Image? Loss of Self-Confidence, Anxiety, Isolation and Depression

An outcome of a somewhat different nature, but fundamental to disrupted primary interaction between 'normals' and a stigmatised group, is that of incorporation of the deviant attributes with which the stigmatised person is ascribed, and their manifestation in terms of more intangible feelings of strain, loss of self-confidence, anxiety and isolation.

The role of informal labellers in solidifying imputations of deviance is particularly difficult to assess in this respect. The inability of labelling theorists to measure the level of intensity of reaction which may lead to internalisation of deviant status - or to assess what makes deviant labels 'stick' - has been a constant source of irritation to critics of this perspective. Yet this totally ignores the relativity of the deviance defining process which, I contend, is one of its greatest strengths. Rather than being a hindrance, it accurately reflects the whole process of deviance defining as one of constantly shifting evaluations. The difficulties inherent in trying to quantify the content of such a process are hardly surprising.

Above all, labelling is a reciprocal process, arising out of the interaction of the moment. It is of critical importance to understand who is defining whom and where. The hearing impaired in the sustained situation of work seem to be particularly vulnerable to the general ascriptions of incompetence which diffusely characterise the hearing population's common-sense stock of knowledge about 'the deaf'. In contrast to casual social encounters, a much greater degree of consistency, intensity and duration

of stigma reactions characterise life at work for the hearing impaired. (This again confirms the need, identified by GARRISON and TESCH (1978), to look carefully at the setting in which evaluative judgements are made). The fundamental human need for affirmative validation of our basic statuses and identities means that it is far from easy to withstand wholesale redefining by those who matter. Outside the family network, colleagues at work often mattered most.

One of the outcomes - in terms of varying degrees of internalisation of feelings of timidity, anxiety, loneliness and even depression - formed a backdrop against which other, more tangible, outcomes were negotiated. I have termed these 'secondary deviant outcomes' in that, although differing in degree, they were generally held by most respondents. Although some degree of role primacy is implicit, I do, however, reject the notion of fixity of response indicated in LEMERT's (1951) usage of the term. The ability of respondents to cope with such feelings varied according to the situation, across time, and with their individual social and personal resources. Such responses did not tend to crystallise into a deviant role

"as a means of defense, attack or adjustment to overt or covert problems created by the consequent societal reaction" (LEMERT, op.cit).

It is an area where personal resources carry as much significance as the theme of communicative competence with which I am chiefly concerned. Yet the fact that such feelings were endemic amongst the respondents I talked with suggests they are one of the more insidious invisible outcomes of the informal defining process. Above all, they arise from those small happenings, the interaction between 'normals' and 'deviants' which GOFFMAN (1968) has referred to as one of the "primal scenes of sociology".

For Mrs. A.H. self-doubt and self-devaluation had resulted in a form of role engulfment. She remarked: "I didn't have a lot of friends at work because I felt different. People avoided me. They felt I was a strain to talk to. I felt alienated. Quite strong.. I asked 'what's wrong with me? Why do they do this to me?' .. I felt my image wasn't 100% .. Colleagues were negative towards me. I felt - like - different. Just backward. All the time inferiority complex".

The erosion of self-confidence is not an abrupt process. It is more

likely to be characterised by a gradual awareness in response to the transition from acceptable to less acceptable status, with the effect of sustained exposure at work to rebuffs and rejection.

For other discreditable respondents, assaults on self-confidence often had ramifications far beyond the immediate incorporation of a de-based self-image. Mr. B.U. said: "My most difficult problem is lack of self-confidence. I lose the initiative in groups".

As a member of a profession where a high premium is placed on qualities of leadership, initiative and self-reliance, the cumulative impact of his precarious status in the eyes of his hearing colleagues might well presage an ominous future in terms of further deviant outcomes, such as the denial of responsibility. This was, however, a prospect Mr. B.U. strenuously refuted.

For Mrs. B.C., feelings of inadequacy and anxiety imperilled her sense of job security. "People who've got normal hearing cannot understand the feelings of inadequacy ... I do go through phases when I feel so insecure .. that I won't be able to hold on to it /the job/. There was a phase when my confidence was badly shaken, when an older supervisor came. She undermined me".

This was not something, I understood, which had troubled her prior to her hearing loss.

Similar feelings of inadequacy and loss of self-confidence have affected both discreditable and discredited respondents. Contrary to my earlier impressions of the protective function of the deaf community having an insulating effect on other life domains, two signing respondents commented on this internalisation of devalued aspects of themselves. Possibly the harsher effects of a life-time's exposure to stigma reactions are modified by virtue of membership with this close-knit culture, but the protection, as noted, does not seem to extend to the work environment. Solace can only be provided by 'swapping tales of woe' of the day's events with colleagues in the evening. Thus Miss M.A. confided: "Lack of confidence. Secret problem. Feel everyone better than me".

Miss R.C. was open about her diffidence as far as social relationships at work were concerned. (It will be recalled that she never has any

social life outside with hearing people). She signed: "Feel nervous and /un/ self-confident .. Draw back".

A closely related response - and a mutually reinforcing one - is that of intense feelings of isolation². As many studies have shown, social isolation is a common outcome for the hearing impaired. Moreover, it is an outcome affecting respondents across all Communication Groups, bearing out the speculations of HERBST and THOMAS (1980) that "..any perceived breakdown of communication is sufficient to engender a feeling of loneliness and beyond that it does not matter how bad the breakdown is. Thus the moderately deaf are as likely to feel lonely as the severely deaf!"

Translating this into my typology, and recalling the resistance I experienced to an investigation of the commonality of perceptions amongst the hearing impaired, this is a prescient - and reassuring - statement.

However, feelings of social isolation at work have rarely been commented on (pace BIRD and TREVAINS, 1978; TREVAINS, 1982) in their studies of those with acquired loss. Certainly the old adage 'You're never so lonely as in a crowd' does not seem to have been applied to a situation where the performance of tasks, rather than the opportunity for socialisation is ostensibly the prime objective. Yet feelings of social isolation at work were endemic. The pressure to derive fulfillment from work for those whose work tasks are largely routine and repetitive tends to be resolved by recourse to precisely the social relationships from which the hearing impaired are segregated and excluded.

Mrs. E.I. confessed: "When the girls are all chatting, I stand there and wait for the conversation to finish. It does make you feel a bit miserable at times".

And Mr. S.L. had been advised against becoming self-employed for this very reason.

A similar response came from discredited respondents. Mr. E.B. commented "I feel very isolated .. But I try to mix. If I didn't, I'd be isolated completely".

And D.S.'s mother remarked: "In circles where deafness is appreciated,

D. is OK. But when he steps outside, at work, there are difficulties. He tries to speak but conversation inevitably turns to hearing people. D's left out. It used to hurt him. It's not so bad now".

As a form of role engulfment, such secondary deviant outcomes did have the appearance of being more solidified than those resulting from exclusion from more tangible goals - such as access to economic status. The sense of movement, however minimal, which tends to characterise the latter, often seemed absent in response to the secondary outcomes I have discussed here. Although integrated in varying degrees, they appeared to form a fairly permanent and stable backcloth against which other forms of strategy management were developed to deal with other aspects of confronting the hearing at work.

Nevertheless, it cannot be emphasised too often that there are degrees of deviantness, and role primacy of the kind suggested by LEMERT was rejected by a small minority of respondents. Efforts at compensation, for example, were used by Mr. B.T. and Miss C.G. Both managed to ward off feelings of isolation by absorption in the job, Mr. B.T. rather more successfully than Miss C.G. At interview Mr. B.T. brought down an old leather Army bag he had designed during the War and lovingly went over the intricacies of design and technique which had gone in- to its making.

For Miss C.G., this strategy was somewhat more precarious, although the tacit realisation of the possibilities of role engulfment were very apparent to her: "Always being busy is very important so you don't feel cut off. Sometimes it hits me if I'm not busy".

Other respondents had learnt how to circumvent what would otherwise be seen as devastating feelings of isolation. Mrs. N.F. was able to deflect the impact. She commented: "I have felt this. But I know how to surmount it now".

Only Miss H.Q. denied any feelings of isolation. Her rich and active social life possibly compensated for any feelings of loneliness

at work, together with the incorporation of a much more positive image of self with which living in the States had equipped her. "Alone, not lonely" she commented, nicely illustrating the distinction.

Feelings of depression were mentioned by only a few respondents, 1 from Group I, 1 from II, 2 from Group IV and 1 from Group V. The fact that they were mentioned at all is significant, given that it was not a question specifically asked, and the thesis was not designed to explore such an area.

The correlation between hearing impairment and some forms of depression has now been established (THOMAS, 1980), but, to my knowledge, its impact on subjects' working lives has not been investigated. I will, therefore, make a very brief reference to it. It seemed to affect discredited respondents particularly hard. Mr. E.B., at first interview, for example commented "No, I don't feel exactly rejected at work. I just feel depressed, low".

Mrs. N.F. was able to use her capacity as a social worker to comment with insight: "Deafness makes you feel psychologically unstable at times".

Its relationship with work was, perhaps, most poignantly illustrated by Mrs. P.K. Feelings of isolation and depression were intimately interwoven - and will be discussed shortly in terms of her daughter's total exclusion from social interaction at work. As Mrs. P.K. commented: "P. gets very depressed. Sometimes people just walk away and ignore her. When a new person comes, a deaf person's a novelty, something new. Then ignore her when it's too difficult".

Thus, to the extent that stigma reactions were widespread and powerful, they often vitally affected the self-esteem - and subsequent behaviour patterns - of those respondents who incorporated them into a deviant role. The secondary deviant outcomes I have just discussed very much reflect the feelings of debased self-worth which, I suggest, are an important response to exclusion from satisfying work relationships.

Any clear-cut distinction between strategy management of discreditable and discredited respondents in relation to these very personalised outcomes was hardly discernible. A few exceptions apart, such feelings affected respondents from all Communication Groups. The only significant difference was an ability 'externally' to attempt to minimise their impact. Skills in communication were less relevant than a more individualised 'tough hide'. Both individual psycho-social and more generalised 'social problem' levels are involved here. As suggested earlier, the two are not readily separable. The meanings an outcome has for an individual 'deviator' are inextricably interwoven with the broader deviance situation in which the individual finds himself immersed.

Indeed, one of the criticisms of the labelling perspective has been concerned with an apparent over-emphasis on individual socio-psychological reactions to stigma. However, as SCHUR (1979) suggests, by the adoption of a broad conception of deviance as a process, and the identification of certain general reaction processes as "...the distinguishing feature of deviance situations, then we are almost inevitably drawn to interpreting such responses and the forces generating them at various levels of the social order".

I have considered it important to include a discussion of secondary deviant outcomes as these are essentially the meanings that an accumulation of negative experiences at work appear to have for the hearing impaired. Meanings and perceptions are, for the larger part of this thesis, treated as embodied in the experiences respondents describe. Here, they have been specifically identified and isolated as distinct phenomena.

The relativity of deviance defining has been viewed as providing essential flexibility and coherence to the whole concept of labelling. As indicated, whilst some conditions might elicit only relatively mild stigma reactions, such as the unease and impatience I have already dis-

cussed, increased departure from the norms of interaction tend to provoke harsher responses. I have argued that communicative 'incompetence', because it interferes so fundamentally with the taken-for-granted process of sociability, is particularly prone to more extreme informal sanctioning. As communication skills increasingly deviated from 'normal' expectations, relationships with colleagues correspondingly deteriorated. 'Trouble' often erupted for discredited respondents who were without the communicative tools with which to negotiate their way out of a sticky situation.

6. HARSHER REACTIONS AND FURTHER OUTCOMES

(a) Teasing, 'Taking the Mickey' and Ridicule

became common stigma reactions. As much can be achieved to shame and degrade by a snicker and a sneer, unkind jokes, mimicry of 'deafisms', mockery of sign language or minimal speech, as by any formal degradation ceremony.

Milder forms of teasing and mockery had been experienced by respondents from all Communication Groups. As with other situations, communicative skills and salience of resources were usually able to save the day for discreditable respondents.

The use of humour as a tactic has already been mentioned in other contexts. One further example will serve to illustrate how it can effectively de-fuse a situation which might otherwise degenerate into unpleasant ridicule. Mrs. E.I. demonstrated her ability "to get the girls laughing with me". This has not been something easily learnt in the face of devaluative judgements. She commented: "People used to take the mickey. They've asked for a coffee and bun and got tea and cakes. But they were a good crowd of girls .. When we got to know each other we had a laugh".

For those unable to wield such communicative tools, strategy options had so narrowed that only deviance avowal - retaliation or capitulation - or denial - were open to respondents.

One particularly pernicious form of 'taking the mickey' is the habit hearing people have of giggling or whispering behind a deaf person's back, secure in the knowledge that little can be done by way of retaliation (other than 'solutions' liable to damage the victim). One of the most common misconceptions of the hearing impaired is that they are thought to be paranoid in this respect. It is, however, a suspicion often well founded, and has affected respondents, at one time or another, from all Communication groups.

Discreditable respondents generally had been able to neutralise its impact by 'shrugging it off'. Mr. C.P., for instance, commented "I've grown out of that. They used to. I know a lot of deaf people experience it".

As an on-going experience for discredited respondents, however, they either capitulated in the verdict, or retaliated in a way which tended to reinforce their already tainted status. As Mrs. P.K. commented of her daughter "Always talking behind her back. Whispering about her. 'That silly cow, we don't want her working with us'. Or 'I'm not having old dopey working with me'".

Miss P.K. had, latterly, at any rate, learnt to live with it, although retaining a keen sense of felt stigma. On the other hand, Mrs. M.R. remarked of her son "If he stops and turns round and sees people laughing and joking in a corner, he thinks its about him ... He gets mad".

Fights were an on-going response to this.

The inculcation of a sense of differentness, of an inherently undesirable kind, which total departures from expected communication skills elicit, gives some indication of the socially controlling powers of informal labellers, something which has been grossly underestimated in the many studies using the labelling perspective. Either way, discredited victims are caught in a Catch 22 position: compliance in the shaming process - or ineffectual rebuttal - both of which tend to reinforce their already deviant status.

(b) "No Signing Here Please!"

Sign Language provided another focus for mockery. It attracted as much opprobrium at work as bizarre or minimal speech. Used with such pride and enjoyment socially, it had to be put into 'cold storage' as far as work was concerned. Only Mr. G.C. worked with other deaf colleagues and was thus able to communicate socially in sign. Both Mr. G.C. and Miss H.Q. maintained they interested their hearing work colleagues in sign, attempting to teach them, and even gaining an appreciative response. Miss H.Q. signed/wrote: "They are even eager to learn signs, as they thought it was fantastic and useful in noisy places or faraway places".

Nevertheless, she was obliged to concede that the usual reaction was very different: "Other times if signing in a group, they stare. We are animals or something".

Other respondents' experiences were seen to provoke outright ridicule and ostracism. This is highlighted by an incident which happened to Mr. L.M., accompanying a deaf friend to a pub after work. A very graphic description of the feelings of being attributed with stigma fall-out ensued: "They seemed to think we shouldn't be there. I got the impression they felt it was almost indecent - something to be covered up. I felt it coming through quite strongly: 'If you want to do this sort of thing go and do it in your own home'-like homosexuality".

An expressed awareness of the devaluation of sign language was responsible for one of the many 'walk-outs' which had characterised the employment career of Mr. H.H. The sight of him and his wife socialising at work in sign had elicited such ridicule that 'sticking it out' had become impossible.

Finally, the ambivalence of Mrs. N.F., brought up and educated orally, but now required to learn sign for the purposes of her job, is perceptively illustrated. "When I was younger I eschewed it. It was associated with inferior intelligence. We used to see the deafies .. All the kids used to laugh. I didn't want to be one of them. I was terrified at school that they'd put me in an institution for the deaf where they signed. I like being oral. I like what I've read and learnt".

(She is currently also doing an Open University course on "The Handicapped in the Community"). "... But now I'm pleased I've learnt to sign. I think people like myself can be helped by it".

Thus sign was generally not only greeted with incomprehension and suspicion, if not outright ridicule, if displayed at work. It was also profoundly irrelevant as a means of sustaining interpersonal relationships at work, or according its users improved status. None of the respondents I talked with had hearing colleagues who knew even the rudiments of sign. Therefore respondents were obliged to rely on writing if they wanted to 'say' anything. It will be shown in Chapter 6 what a cumbersome device this is, tending to kill any spontaneity of dialogue. As far as hearing work colleagues were concerned, the knowledge that respondents used an arcane visual language in their social lives, often further distanced them.

What is interesting about signing respondents is that the deaf community does not appear to extend its protective function which it exercises socially into the work environment. This was explained to me (MILES, 1982), as constituting a quite impractical proposition³. Its ramifications, however, are important for the signing community. The challenge which sign language is seen to pose socially to the assumptions that speech and hearing are the only valid and proper ways of experiencing life is obscured in the hearing-dominated world of work. The common response of respondents to the experience of stigma socially - "it doesn't bother me" - was conspicuous by its absence at work.

Generally lacking intelligible speech, what made any difference at all in handling stigma reactions at work were the salience of respondents' personal resources, and literacy. Fluency in sign on its own, unaccompanied by any ability to read or write English, relegated signing respondents to the debased status of their functionally illiterate orally deaf colleagues. Reparation of a bruised and battered self-image at the Deaf Club in the evenings was of little consequence to survival

at work the following day. Instead, therefore, of a strategy of a vigorous repudiation of stigma, characteristic of their response socially, superficial capitulation at work was more common (Miss H.Q., possibly, excepted).

(c) Trouble

As a response to 'taking the mickey' and the more extreme forms of stigma reaction, ridicule, trouble often occurred, sometimes with quite drastic repercussions. Again, the situated nature of deviantising is important here. With the naked and sustained exposure of defective communication skills, social mismanagement had ramifications. Disclosure in casual social encounters rarely carried such overt penalties. This is not to suggest that penalties incurred generally outside the work situation were not equally pernicious and detrimental to self-esteem. But one could escape them. Trouble at work, particularly mishandled trouble, not only reinforced stereotypic images. It also led, in some cases, to overt sanctions and outcomes in the form of job loss. Outcomes were characteristically (in SCHUR's terms) both definitions of the situation and a "concrete state of affairs" (1979).

As stressed earlier, it is the very special nature of the work situation which facilitates the duration, consistency and intensity of stigma reactions. Both Mr. H.H. and Mr. E.B., at corroboration interviews, described how trouble tended to occur in response to the stigma reactions described above. Disrupted relationships with colleagues were seen as instrumental in leading to such an outcome.

Mr. H.H. commented: "If there are problems at work, hearing people talk them out. If you don't get on with colleagues then they make life miserable for you. I've put up with it for years. Mostly they try to belittle you. Deaf people resent it. Where they can't stick up for themselves, they get frustrated. If there was a group, they'd get up and say 'Watch it'. But so few deaf people work together ... It's because the belittling's constant you get so many job changes".

The implications for 'sticking it out' are readily apparent.

The amplifying nature of the deviance defining process is also important here. Mr. E.B. gave some insight as to how an accumulation of often small incidents could escalate out of control. Talking of some of his (orally) deaf colleagues, he remarked: "It's often an accumulation of small things ... they can feel slighted by their colleagues, or they may misunderstand. They may imagine something's happened. Things, relationships, become distorted. The pressure builds up. If it's not always easily resolvable, it's like a pressure cooker. At work, you can't always go away on your own with a book to cool down".

(This is indeed a vivid example of the constraints which the work situation imposes, particularly in relation to the lack of control hearing impaired employees tend to have over large areas of their work lives. In casual social interaction, the situation would not have been allowed to deteriorate in such a manner. The offending actor would have withdrawn).

The relativity of deviance defining and the differential impact of stigma reactions can best be shown by reference to the tactics of five subjects in response to not dissimilar provocation, resulting in potential or actual trouble. Both commonality of categorisation and differential response are illustrated. As SCHUR (1979) has noted: "Focussing .. on the common reaction process and emphasizing variability in kinds and intensities of attributed meanings .. better enables one to consider both the similarities and the differences in these situations".

The very different outcomes in these cases demonstrate both the effects of communicative competence, and within this umbrella framework, salience of resources. Although 'taking the mickey' tended to be a more characteristic stigma response to increased deviation from 'standard' communication skills, some hearing impaired respondents from all Groups had been on the receiving end of a continuum of teasing and mockery. It was the harshness of response and the restricted means of deflecting it which characterised those most communicatively handicapped.

Communicative competence, as well as the salience of resources in handling trouble are well illustrated by Mr. B.T. (I). Recalling his previous employment as a leather worker, he said "Because I was deaf,

the foreman tried to take the mickey. It didn't work. I just went for him. Then he left me alone".

Precisely why recourse to physical violence in this instance did not result in instant dismissal for Mr. B.T. is speculative. But it would suggest that an ability subsequently to negotiate his way out of trouble by recourse to accounts, apologies, explanations which were considered credible - simply because speech performance did not irritate shared understandings - permitted resumption of discreditable status. His credibility rests firmly on the retention of acceptable communicative tools.

Capitulation, however, characterised the responses of the following two respondents. A particularly unpleasant incident had happened to Mr. J.R. (II) which caused him to break down in tears at the interview re-collecting it. It is, however, indicative of the carelessness - if not deliberate cruelty - which is characteristic of the deviance defining process.

A work colleague had shouted a greeting at him from behind which, of course, had not been heard. The colleague had said: "What's the matter with you, J? Got the 'ump? I've said 'Good Morning' to you twice and you've not answered".

Mr. J.R. explained to me: "I've told them to come in front of me. When you say you didn't hear, they've got disbelief on their faces. Things can get nasty at times. He said 'Why don't you wear a b. plackard on your back to say you're deaf?'".

Mr. J.R., far from resilient to such onslaughts on his self-esteem, had gone off sick, and has since been employed in semi-sheltered employment where he is less vulnerable to the impact of stigma, working with others similarly afflicted.

With the progressive narrowing of options which increasing communicative incompetence entailed, deviance avowal, in one form or the other, was the more common strategy. Given similar lack of communicative skills, salience of personal resources did assume importance in determining whether confrontation or capitulation techniques were chosen.

Some respondents' lives had rarely been free from incidents and

and trouble. A similar lack of resilience was shown by Miss L.S. (III) in tears at interview as she recollected the day's events. Reliant on speech and gesture, she lipreads with difficulty, and her speech, particularly when nervous, is indistinct, and laced with grammatical errors. A cleaner in a home for the mentally handicapped, she is herself as vulnerable to imputations of stigma as her charges would be on the outside. With a fine sense of the pecking order of the stigmatised, she was often the butt of practical jokes with which her communicative skills were totally unable to cope. "One of the instructors today called me 'stupid'. The boys won't stay out of the toilet. I said 'no'. I'd just cleaned it. So the boy went to the instructor. I said 'I go by the rules'. Boys should stay out of the toilets while I'm doing them. I'm embarrassed if a boy's urinating in the toilet while I'm doing them. Particularly as they're handicapped. They often miss".

She found it particularly difficult to "pick up again" after such an incident, such was the onslaught on her self-esteem: "I don't know whether I shall go on. I suppose I must".

At corroboration interview, she was desparately worried about the possibility of dismissal over a further incident. "A man exposed himself. They all said I imagined it. It's not true. And they called me mental".

Her entire employment career had been peppered with such incidents. She admitted to some 10 dismissals, a situation which her social worker seemed unable to alleviate. Role engulfment in the image she perceived others to have of her generalised incompetence was spread over other life domains than employment, as I was to discover. Both her deviant communication skills and lack of salience of resources precluded her making effective use of neutralising tactics, such as humour, or the production of credible accounts, explanations, apologies. It also extended to a refutation of the very credibility of her as a person. However variable the provocation, it seemed, Miss L.S. responded to each stigma reaction with a similar internalisation of a sense of shamefulness and defilement⁴.

Mr. H.H., also in Communication Group III, handled stigma rather differently. After a similar history of dismissals, redundancies and voluntary walk-outs, he wrote to me: "Then four years of misery at xx as draughtsman. Wife worked there too. How we were teased constantly. It proved too much that I didn't care if I got the sack. I just threw the role (sic) of drawing at my successor foreman .. Now the firm I am working for seems quite friendly but I feel it still difficult to shake off the past of bitterness".

Walking-out, however, although an expression of confrontation, does not effectively proclaim a counter-stigma ideology. It lacks credibility as anything other than a gesture of defeat. Moreover, it reinforced already-entrenched images of tainted status, and, in turn, produced further deviant outcomes. Pejorative definitions preceded his subsequent job applications.

Where 'taking the mickey' degenerated into outright provocation when the respondent had no communicative resources at all with which to repair the situation, or to deflect the impact of constant rebuffs and ridicule, either capitulation and concurrence in the verdict occurred; or recourse to ineffective withdrawal or physical 'solutions' were attempted.

With no vehicle of acceptable communication other than home-made signs comprehensible only to his mother, frequent eruptions of violence were characteristic accompaniments of Mr. M.R.'s fractured relationships with his colleagues at work. Mrs. M.R. referred to M's job in a shoe-repair shop: "Another lad used to tease him. M. got mad and hit him". Ridicule cost him his only other job as a lampshade-maker. His mother commented again: "They kept teasing him. He got really mad. There was another fight and he was sacked .. They accept the other person's version. When he feels he's being baited, laughed at, it makes him explode".

This is the most extreme example of so-called 'acting-out' behaviour I was to encounter in this sample. How typical it is I was unable to establish. It is, perhaps, illustrative of the way in which

a total inability to communicate conventionally can be smoothly and conveniently rationalised and medicalised by official labellers as an individual pathology problem. Rather than appreciating the cumulative impact of the negative evaluations evoked by 'deviant' communicative performance, its victims may be more acceptably classified as suffering from "a behaviour disorder" - in much the same way as some 'problem' children are now conveniently subsumed under the rubric of 'hyperkinesis' (CONRAD, 1975). At best he was regarded by social workers as "someone you can't cope with", or "functionally mentally retarded"; at worst "mentally disturbed". Whilst ill-qualified to assess clinically any symptoms of mental retardation, let alone 'mental disturbance', I can only note that although his responses were sometimes incongruous, I had no impression of dullness. And of crucial importance to the situational nature of deviance defining is my observation that relationships at home seemed perfectly harmonious.

What is clearly apparent is that in the absence of communication skills with which to soothe ruffled tempers, there was rarely any intervening outside authority to contain potentially explosive situations. The outcome of any baiting was usually settled on the spot - to the detriment of the hearing impaired employee. Mrs. M.R., for example, had only been phoned when it was too late to do anything but pick up the shattered pieces. Much earlier intervention is needed to prevent the escalation of such incidents into crises. It is a role neither the DRO nor social workers seemed generally prepared to handle.⁵

The role of informal definers in instigating trouble of this nature has, I suggest, rarely been appreciated. Being the peer equals of my respondents would lead one to expect a supportive, protective role against 'them' (the employers). Nothing was farther from the case. Moreover, it is their definitions which prevail over any contrary 'reality' respondents may have of the situation.

(d) The Entry of Employers: Reinforcing the Verdict

Little has been mentioned to date about the nature of relationships with employers, and the extent to which stereotypes perceived to be held by prospective employers at the job application stage are manifested in the actual work situation; and what, if any, role they play in enabling or hindering the hearing impaired to 'stick it out' at work.

Consistent with the findings of STUCKLESS et al. (1975), social communication with employers or immediate supervisors constituted only a fraction of total interaction time in a working day. Thus relationships with the boss were not mentioned in nearly so much detail or with such frequency as were relations with colleagues. They became of concern largely when trouble arose and had to be dealt with at a superior level.

For discreditable respondents, relations seemed, on the whole, relatively unproblematic in that they were hardly commented on as being anything other than 'O.K.' or 'moderately helpful' where the impairment was known about. So long as work performance was not jeopardised by disruptions involving abrasive incidents with colleagues, management seemed at best uninterested and at worst disbelieving or patronisingly paternalistic. Miss V.G. (I), for example, found her headmaster, whilst cognisant of her difficulties, "amiably indifferent". Whilst Mr. H.H. noted: "Employers think of you paternalistically. Like being a child. They expect you to be passive. The other person has the final say. You haven't".

However, when trouble or incidents occurred, then stereotyping and stigma reactions from employers played a significant part in the more formal labelling of the hearing impaired, and in solidifying a deviant verdict. The tendency to be automatically blamed for things going wrong, for example, attests to the underlying power of culturally available stereotypes. Scapegoating is an integral part of stereotyping. Again this was particularly so for discredited respondents with unin-

telligible speech and poor literacy, who were caught in a 'zero-sum' situation, being unable to "tell their side of the story".

Miss M.A., for example, had an employment history punctuated by incidents, trouble and rows which frequently involved authority figures, although by temperament she was far from aggressive. Without direct access at work to the support available socially from the deaf community, she found it difficult effectively to neutralise or confront imputations of stigma - something she accomplished with relative ease socially. When trouble and rows occurred at work, her discredited status was accorded temporary role primacy in her meaning system.

Commenting of one machining job she signed: "Blame me. Someone slit pockets of anoraks I machined. I was crying. Very upset. I left".

And of another job: "Forewoman spiteful. Picked on everyone. But most with me".

Finally, a third: "Trouble with Indian worker. He called me liar. Complained to forewoman. She tell me I get given notice unless apologised. Refused. Walked out".

Miss H.Q. was the only signing respondent to be relatively well-established, earning the grudging respect even of the Security Guard of the company she worked for, as I discovered when she took a party of deaf friends and myself round. He commented to me, unnecessarily sotto voce: "They don't just take anyone on here, you know. It's highly skilled work. Where did she learn?"

The more positive and enlightened policies towards the deaf in America are, I suggest, responsible for much of Miss H.Q.'s relative immunity from many of the stigma reactions of her British work colleagues.

Nevertheless, she related (partly in sign, partly in writing) an incident which had happened to a deaf friend of hers working in a bakery, which indicated a keen awareness of the tactic of scapegoating, perceived as routinely employed against the deaf. "Once the baker put breads on the trays to cool (sic) and wheel them to other place. Just to save time, he pushed it on and accidentally (sic) hit the deaf person who didn't hear the warning. She was blamed. When hearing careless, they blame deaf".

However, it is not simply that employers are called in when trouble arises from incidents involving disrupted encounters. On occasions, trouble did arise directly from misunderstood instructions. As Mrs. E.I. noted: "I've been in trouble. The supervisor would say 'I've told you to do this and you've gone and done something else.' It does make you think you're slow".

And Mr. F. J. (III) reported a similar experience.

Generally, however, trouble in response to misunderstood or misheard instructions in task-related activities was less a feature of the scene than that arising from violations of interaction generally between hearing impaired workers and employers. Stigma and stereotyping occur at all levels of the employment hierarchy. Again, respondents from all Communication groups suffered stigma reactions, although the impact and outcome varied with preserved or acquired speech and lipreading skills and, to a lesser extent, salience of resources.

Mrs. E.I. related an incident which illustrates this. "The Guv'nor at the present job said to his secretary 'I say Good Morning to her and she never answers me. What's wrong with her?' He thought I was being rude. It was the secretary who smoothed things out".

She was fortunate in having someone 'in the know' who was sympathetic; otherwise, as she acknowledged, things might have escalated and "turned nasty".

Mrs. S.T. (IV), with barely intelligible speech, but literate and a fluent signer, also indicated troubled relationships with employers. Again this relates to the master status or 'spread' phenomenon characteristic of the stigmatised. Her deviant speech was generalised outwards to embrace incompetence in every other sphere of activity. It is an image, as she confirmed, only grudgingly relinquished. Referring to a factory job she once had as a machinist, she commented/signed: "I got really rude reactions from the immediate supervisor until I showed what I could do".

Another time she referred to a row with the boss where she worked as a canteen lady. "He called me 'stupid'. So I asked for a job in the Personnel Office. She was quite pleasant but looked very star-

tled. I said 'It's all right. I can read and write!'"

Nevertheless, Mrs. S.T. sought to deny the 'reality' of a life-time's experience of rejections and rebuffs in the face of her deficient communication skills. The simple, half-signed, half-spoken phrase "You have to fight for it" encompassed a 20 year struggle for recognition of the non-tainted aspects of her self. Her recent appointments as part-time sign language tutor were still not seen by her as her work.

The necessity of having to prove one's competence in the face of employers' stereotyped expectations of incompetence, was a feature of the lives of many respondents. 4 discreditable subjects from Group I commented on the necessity of working overtime, and doubly hard to make good their own internalised sense of shamefulness. Mrs. A.B.(I) for instance, puts in long extra hours to 'prove' she is as capable as her hearing colleagues, in the eyes of her employer. "I'm conscious of the need to be particularly good at the job in order to compensate perhaps for not hearing as well at interviews. Otherwise how would I ever get over the feeling of others thinking 'How can she do the job if she's deaf?' Particularly others at /HQ/".

In a sense, both discreditable and discredited respondents felt themselves tried, found guilty and sentenced before they even started.

The cultural stereotypes, attributing traits of stupidity, gormlessness, incompetence to the hearing impaired seemed to form as solid a part of the common-sense stock of knowledge of employers as their hearing employees. Where violations of interactional norms occurred and interpersonal relationships were disrupted, employers generally responded by reinforcing the negative, informal definitions already in existence.

However, not all discredited respondents perceived their work experience in terms of 'trouble' in the sense with which I have been concerned. For Mr. M.C., Mr. G.C., Mr. D.S., Miss R.C. and Miss G.F., their communicative incompetence was perceived to cause persistent problems, - arising as much from peer exclusion from social and work-re-

lated activities as we shall see - rather than precipitating a series of crises. It was a demonstration of the salience of their resources in sustaining a working life, however uncongenial in some cases. Mr. M.C.'s refusal to concur in the verdict of others led to a combined policy of denial and a vigorous assertion of his deaf identity* in an endeavour to retain some remnants of his tattered self-image: "It's up to me to make a move. I can't sit back. I have to sense peoples' attitudes. If they seem indifferent I leave them alone. I've suffered many rebuffs but I've learnt not to bother with them .. I select. I will go on until I do communicate. Even with paper and pencil. I've known some deaf who approach hearing colleagues and say 'I'm deaf'. 'What?' And left. Not me. I have to hit back".

In other areas of his working life, conversely, he pursued a policy of appeasement.

All discredited respondents, however, were obliged to have recourse to a variety of stratagems in order to negotiate more acceptable definitions of themselves in the face of systematic and sustained humiliation by colleagues and supervisors. An effective policy of confrontation cannot generally be sustained within the work setting.

As stressed earlier, it would be a mistake, however, to regard either compliance or assertiveness as more than superficial manifestations of the real possibilities for negotiation. As I shall continue to demonstrate, the ingenuity of people in resisting imputations of stigma is endless. "Beneath the mask of 'primary adjustment' to mortification - surface compliance or deference - the real self stakes out a defence of 'secondary adjustments' marking out private territory". (IGNATIEFF, 1983)

(e) Being Sent to Coventry

The experience of being avoided, segregated and ostracised represents a point at the extreme end of the moral, socio-psychological dimension of the stigma reaction continuum I have been discussing in this chapter. It is a feature which characterises the treatment of most

stigmatised groups, and was a common characteristic of the pattern of

* Such an assertion of his deaf identity is interesting considering his relatively late repudiation of the signing deaf community. Discredited orally deaf subjects are rarely so robust. His identification with the oral hearing world followed the adoption of a deaf child, and pressures from his profoundly prelingually orally deaf wife to bring the child up in a hearing environment.

social relationships experienced by many discredited respondents. It is in sharp painful contrast to the robust rebuttal of such shaming definitions of self shown by, for example, Mr. N.M., still relatively 'in control' communicatively: "They daren't avoid me. I'd be after them if they did! Whatever my position they'd get wop if I heard any of that prize idiot stuff. I wouldn't take it sitting down what-ever".

Despite some evident departures from the norms of expected communicative competence, and the strain of sustaining those positive definitions of self over a time period, with improved skills the salience of his emotional and social resources is also crucial here. It is just such resources which the discredited hearing impaired are generally unable to command. Only in exceptional cases are salient resources sufficient to compensate for a tainted status.

Deliberate rudeness was a response with which discredited respondents were only too familiar. Signing respondents were angry and resentful of such treatment (as were the orally born deaf), but were generally silently obliged to concur in the verdict at work if they wished to avoid trouble. Miss M.A. had learnt early on: "Hearing unkind to deaf. When job in factory, some of work colleagues rude .. Ignored by some girls".

Her voice, or rather its absence, had been commented on: "People make remarks. Not direct. But I pick them up ..ergh! Dislike/Dis-taste".

And Miss R.C. of the girls in her office noted: "Sometimes they talk mock on deaf .. They ignore with deaf person because they can't explain too long story. They like to speak short .. At work, the girls talk close and leave me behind".

Ostracism and total segregation from all but the most perfunctory contact with hearing work peers were thus an integral part of the perceptions which discredited respondents brought to their relationships with hearing colleagues at work. Respondents were often left severely alone to get on with their work, silently contemplating their beleaguered state. As Mrs. P.K.'s mother commented: "P. gets left out. Of everything. In a depressed sort of way".

The fact that many discredited respondents did continue to 'stick it out' working under such conditions is a remarkable testament to the resilience of stigmatised victims who are subjected to daily assaults on their sense of self-worth. The crucial importance of such minor adjustments, rationalisations, self-denial mechanisms as can be made, and which constitute the only feasible defence in such circumstances, cannot be over-estimated.

There is no more telling comment on the penalising impact of exclusion than the experience of Miss P.K. who, ostracised on her machine, and lacking totally the social stimulation which might have made her uncongenial job bearable, was lulled to sleep by the fierce strip lighting overhead. The result was predictable: she was dismissed.

It would thus appear that in the eyes of colleagues and employers, a certain level of communicative incompetence does not exceed informal toleration limits. However, almost all hearing impaired respondents were either subject to stigma reactions, or anticipated them, in the form of unease, awkwardness, irritation and impatience, and some teasing. On a minor level, any dislocation in interpersonal relationships can, generally, be contained within such a framework, despite common secondary deviant outcomes of strain, isolation, feelings of inadequacy, as well as 'automatic' exclusion from participation in the small social rituals of work. Nevertheless, employment represents a situation where even the potentially stigmatised are acutely vulnerable to possible rejection from their peers. It is a situation where, if communicative competence is sufficiently in question, the duration, consistency and intensity of stigma reactions may take a real toll.

Beyond a quite arbitrary point, it seems, 'deviant' communication performance appears to attract particularly destructive sanctions from informal definers. The hearing impaired, on their part, it would seem, are expected to be docile and unresistant to constant exposure to stigma

reactions, and to conform to the stereotypes hearing people have of those with 'shameful' conditions. Respondents feel themselves to be trapped in equally distasteful roles: compliance, or rather futile attempts at assertiveness. Incidents and trouble are 'resolved' by silent acquiescence in a blameworthy status, or by walk-outs or dismissals. Employers or supervisors are called in to confirm the verdict. Both responses may further deviantise the hearing impaired victim in his quest for alternative employment.

The applicability of a labelling perspective to illustrate the power of informal definers to control those whose condition is 'out of line' has, I hope, been amply demonstrated in the foregoing discussion. Although such power is less amenable to identification than the more visibly accessible sanctioning by official agents of social control, it is a form of penalising which is crucial to an understanding of the devalued status of many hearing impaired people at work.

No rationalisation, such as reliance on the usual explanation of the intrinsic limitations imposed by the impairment, can otherwise explain the deteriorated social relationships, or exclusion from participation in social activities at work, which are the lot of many of the hearing impaired respondents in this sample. They are both the victims of their hearing loss; and, crucially, of the largely pejorative evaluations of others. Yet, as noted, the influence of the work ethic is such that many respondents did 'stick it out'.

In the final empirical chapter, the ramifications of both informal and more formal processing will be explored in terms of the end point of the continuum of stigma reactions I have been using: namely, denial of access to legitimate economic opportunities. The extent to which ascriptions of deviance are perceived to threaten or block such access will be weighed against the routine accounting procedures developed by the hearing impaired in an attempt to control their relations with

representatives of the hearing world of work; and the innovative power of people to negotiate definitions of themselves which challenge these imputations.

NOTES

1. For those suffering from conductive deafness, aids are generally effective. However, for the numerically greater population suffering from sensori-neural (or combined conductive and sensori-neural loss) increased amplification merely increases already distorted sound, and is largely incorrecable. An aid cannot compensate for what the sensori-neurally deafened lack above all: the ability to discriminate speech sounds.

2. I am using the term both in the way HERBST and THOMAS (1980) define it, ie. as "an ability to initiate and maintain relationships outside the home"; and in the form of emotional isolation, ie. the ability to sustain close emotional relationships with significant others. Closeness is a matter of degree and 'significant others' are as much a part of the work situation as the home environment.

3. The idea of appointing intercessors from the deaf community was evidently not perceived as a practicable suggestion. Ms. MILES commented: "The deaf community can't intervene. The deaf are at work during work hours. Social workers are not members of the deaf community". The idea of a person with a broader-based understanding of the problems of all hearing impaired, not necessarily appointed from the deaf community, was not considered. However, the lack of such professional people from the deaf world to tackle such a role is significant. BRIEN (1981) addresses this point admirably. He notes: "... it is the case that a lack of opportunity to contribute has the cumulative effect of ensuring that you are less able to contribute, should the chance ever arise. It is all too easy to attribute inability to a person with a disability when, in fact, it may more appropriately be explained by lack of experience".

4. Whilst the problems of family dynamics between hearing parents and deaf children have been addressed, the question of family dynamics with 'adult children' has received less attention. At corroboration interview with Miss L.S. I discovered why she suffered so from the perpetual onslaughts on her self-esteem. Aged 32, parental domination of her life - in which she partially acquiesced - was almost total. Although paying lip-service to her quest for 'independence', it was resented. Strangers were closely vetted, including myself. She had just bought herself a diamond ring which she hoped her first boy friend "would approve of". Her parents were ignorant of this liaison. She told me that her GP had advised her "I've been accepted to have a baby" and was desperate for information on the facts of life. Any books on the subject were banned in the house as "filth". I abandoned much attempt at corroboration to try and help. After 1½ hours, during which time we had mutually decided to finish in about 20 minutes, her father burst into the room and ordered me out of the house, leaving her in helpless tears.

5. Yet in the US, SMITH (1979) notes several companies have introduced interpreting services (Kodak, Tektronix), principally for short-term assignments such as interviews, occupational testing, on-the-job orientation. However, the success of such a scheme in clarifying misunderstandings, and the prevention of 'trouble' and future problems has evidently more than proved its worth. SMITH comments: "The need is to convince industry that facilitating communication with deaf employees is advantageous to personnel relations and to company efficiency".

CHAPTER 6: MAKING THE MOST OF A BAD JOB

I shall, in this final empirical chapter, look at how the hearing impaired, once in the job and assuming an ability to 'stick it out', perceive their overall employment prospects in the longer term; what further 'obstacles' there are to contend with, and how the sanctioning process within the work setting differentially precludes access to legitimate economic goals. I shall be more concerned with the more formal sanctioning process - principally at the intermediate level of immediate supervisor and employer - although labelling at the primary level of interaction with hearing work peers is still instrumental in leading to deviant outcomes. Thus, although I shall initially be looking at the application of those stigma reactions dealt with in the previous chapter, as far as an analysis of information deprivation, and the results of seeking help, advice and instructions are concerned, my main interest lies in the area of economic containment at the other end of the stigma reaction continuum. As stressed throughout, however, the one is integral to the other.

Firstly, I propose to examine how the stigma reactions discussed in Chapter 5 affect so-called 'task-related activities', and the way respondents perceive themselves to be excluded from these. (I consider ARGYLE'S (1969, 1972) distinction between social/emotional and task-related interaction not only laborious but misconceived). Lack of interaction necessary for the performance of one's job - access to information and help, and the receipt of instructions, for example, - are different only in degree from exclusion from so-called 'social' activities at work, such as gossip. It is the complex interweaving of the two which is at issue here.

This leads on to a consideration of broader exclusion from participation in achievement goals generally considered essential to 'getting on' in our culture: in terms of denial of access to promotion prospects,

underemployment, and a reduced quality of working life. The sequential nature of deviantising is particularly important at this level of analysis. Non participation at the level of primary interaction has significant implications for other, more tangible outcomes. As demonstrated, the power of informal labellers to exercise stigma as a form of social control has a tendency to 'snowball' leading to deviant outcomes at the broader economic level. To the extent that differential outcomes do emerge generally reflects, as argued, differences in communicative competence (and sometimes, within that rubric, salience of resources).

I will look at how hearing impaired respondents in this sample incorporated this process into their own meaning structures, and examine the negotiations and bargains struck in an attempt to neutralise the impact of deviance defining. The extent to which exclusion is perceived to affect all hearing impaired respondents - in varying degrees - as a result of the practice of uniformly categorising them at the lowest common denominator of competence, will be discussed.

1. SINS OF COMMISSION OR OMISSION?

(a) Missing Out on Things: "It's what you're not told that matters"

What most hearing impaired respondents suffered from at work was selective, if not total deprivation of information - about social happenings, work-related events, if not actual work itself. Nothing serves to accentuate more keenly the sense of isolation associated with hearing loss, and the way in which non-involvement illustrates the careless, perfunctory manner in which the shameful, or potentially shameful, are treated. It signifies precisely that crucial lack of acceptance which GOFFMAN argues is such an important index of stigma.

This sense of 'missing out on things' was often keenly internalised as both felt and enacted stigma by respondents from all Communication Groups. It is analagous, in many ways, to the exclusion from gossip

discussed in the previous chapter, but may carry more important ramifications. Often information about the availability of a job in another department, someone's resignation, the possibility of movement elsewhere, comes in over this grapevine.

This has important implications. Whilst signing respondents are totally reliant on the deaf culture for this vital information exchange, no such supportive network exists for either discreditable or discredited orally deaf respondents. In the work situation, however, all groups suffered information deprivation, the signing deaf included.

Few discreditable respondents seemed to employ 'someone in the know' to help them out. It was intensely galling for this group to find that other people simply assumed they knew what was going on. They had to make a constant and sustained effort to maintain a grip on hearing information to ensure they were not simply by-passed and excluded.

Miss B.G. and Mr. N.M. illustrated these two aspects: Miss B.G. commented "There are great gaps of information. An interesting thing that has happened, for example, I'll miss three-quarters of it. Or I might hear the beginning and the end. Later people will say in surprise 'Oh, but didn't you know?' .. I just feel that hearing people know more about whatever it is. If I want information I've got to make an effort to get it. Or someone has to make a real effort to tell me."

Such effort, she maintained, was conspicuous by its absence.

Even Mr. N.M., robustly deflecting any possible imputations of stigma which might well have attached to him in the early stages of his hearing loss, when he was unable to monitor the pitch and intensity of his voice, confessed to a sense of weariness. At corroboration interview, the struggle to maintain his definition of the situation was beginning to tell. To use the phone effectively in his capacity as sales executive means also being kept in touch with the office grapevine. He noted: "I've found it difficult to hold. Yes, it's still good. But I've found with time that hearing people I've previously educated tend to 'forget' me. They're not keeping me informed. So I find myself on the phone without background information. If they can't tell me then it's a waste of time being here. These are the times when I feel like giving up".

The lack of self-control over what one elects to know, from the plethora of input available to a normally hearing person, and the absence of effort by others to 'fill in' the gaps, denote, I suggest, a form of insidious social control over available knowledge, characteristic of many stigmatised minority groups. The selective filtering of information which it is deemed 'appropriate' for the hearing impaired to have is securely in the hands of the dominant hearing majority who define what shall and what shall not be told. The same process will be apparent again in discussing 'being told what to do'. It is a particularly restrictive and oppressive aspect of both formal and informal labelling, and indicative of the power imbalance between definer and defined. It was commented on again by Miss B.G.: "It's hearing people who decide what's important for me to know".

The sense of frustration, if not outright alienation, which accompanied such exclusion characterised respondents from all Communication groups. It reflected on their sense of self-worth. For those whose communication deviated increasingly from the norm, careless assumptions that respondents would automatically pick things up gave way to more deliberate exclusion. Discredited respondents were simply 'not worth the bother'.

Resentment and impotent anger characterised the perceptions of two respondents. Mr. E.B. illustrates both his own and Mr. H.H.'s feelings on the subject: "I miss so many things. I'm always the last to be told anything. It makes me feel so useless".

For discredited respondents, too, the onus is on them to struggle, with even less skills at their disposal, for that elusive information, or suffer total deprivation of input. It is only socially that signing respondents are able to repair, to some extent, the information gap. Exasperation, or, at best, a very truncated 'explanation' was usually the result. Any 'filling-in' became a brief, hurried summary, with all the nuances and 'affect' which give such renditions their flavour, omitted. And truncating information, of course, by no means ensures a faithful

and accurate description of what happened. Miss M.A. signed: "Hearing cut what they say. Make it short".

The stigmatising nature of what was perceived as barely suppressed irritability and impatience on the part of hearing co-workers at having demands made on them was very evident. Often respondents sacrificed information in order to avoid provoking the 'too much bother/trouble' response - a pattern which will be observed in the following section.

It is in sharp contrast to my own experience where Miss M.A. patiently abbreviated her signs in order to accommodate to my limited signing vocabulary (an ironic reversal of roles). The difference lies in her perseverance - the re-structuring of a phrase, the use of alternative signs, until I was able to grasp her meaning. My 'stupidity' was not negatively evaluated in her eyes. She persevered until I could share her story.

Whilst this truncation process might appear to be 'understandable' under pressure, and I have already referred to the amount of energy required to communicate with the hearing impaired, it does not excuse the lack of written materials, or the almost total reluctance to devise ways around the difficulty. As I have argued in other contexts, the very lack of effort simply confirms the pervasiveness of the underlying stereotypes of incompetence with which the hearing impaired tend to be attributed. Discredited respondents, particularly, are so negatively evaluated as globally incompetent, as not to be worth the bother. The full extent of what the hearing impaired are missing is, of course, appreciated least by the hearing impaired themselves, hence the insidious nature of the process.

This disinclination to bother, the response of 'it's too much trouble', is contrary to the contention of CRAMMATTE (op.cit) who found for the professional workers he studied, a relatively free and easy interchange of communication between deaf and hearing co-workers. His respondents, however, were relatively communicatively competent, and their professional status - as with Mr. N.M. - gave them additional bargaining tools.

It is not simply chance work-related information which is not made available to the hearing impaired. There can be no more devastating deprivation of information and implicit evaluation of the lack of worth of the stigmatised than that revealed by the following incident. (The expressive bitterness with which it was signed to me is obscured in the translation). Miss R.C., born in Enniskillen, County Fermanagh, worked for 8 years in Belfast. She signed/wrote: "The troubles made me nervous. Often phone to my work to say bomb nearly every day. /Once/ I looked around the girls. Empty and never told me to go with them for bomb scare. I was angry. Not nice to leave me".

(b) Asking for Help: "It's too much trouble"

The fear of provoking the 'it's too much trouble' response also affected the general area of asking for help, advice and assistance.

In answer to the question "Would you go to your colleagues for help if there was something you hadn't heard and understood properly?", the initial answer from most respondents was in the affirmative. This seemed to suggest initially some toleration level existed in response to deviations from expected communicative competence when it came to the work task in hand. However, further exploration suggested that although help could be requested, the anticipation of engendering irritation and annoyance was such that requests for help were made sparingly, and with great reluctance.

In many cases, the anticipation was not ill-founded. Response to requests, although dependent on discreditable or discredited status, was generally minimal, paired to the bare bones and, for the discredited deaf, quickly terminated. Even for the discreditable hearing impaired, there appeared to be a familiar unwillingness to bother to help out if the going seemed to be difficult. The stigmatised are not perceived as reciprocating in the interaction process. Always being on the receiving end of help not only reinforces an already tainted image of incompetence; it indicates the relative lack of exchange tools with which to negotiate

bargains - reflecting the power imbalance between definer and defined.

The importance of the power dimension is something that labelling critics have tended to ignore. Power has usually been analysed macro-sociologically. But hierarchical relationships are not simply abstract forces operating on people. The acquisition of power is a human undertaking. A micro-sociological analysis is also important. Even at the primary level of interaction, differential access to power has been an integral - if sometimes implicit - part of stigma contests.

The initiative to 'fill in' thus rarely came from colleagues. The onus was always on respondents to ask if they dare, and to have to ask repeatedly if comprehension was to be secured. As Mr. M.C. (IV) noted:
"If we're talked to in a group no one has the idea of telling me afterwards what was said. I have to ask".

The anticipation of being thought inept, incompetent, helpless, was evidently so powerful that respondents sometimes sacrificed much-needed assistance to preserve themselves from assaults on their self-esteem. In the words of Mrs. E.I. (II): "No, I'd rather take a chance". The alternatives are hazardous. Asking invites disclosure and concomitant incredulity and disparagement; refusal to ask in an attempt to minimise stigma reactions of irritation risks additional sanctions for inadvertent mistakes.

Reluctance to ask meant that respondents were additionally excluded from the mutual support network which generally operates in a work situation to 'cover' mistakes and 'explain' any deficiencies in task performance to one's superiors. The hearing impaired were generally left to fend for themselves, doubly penalised by the fear of eliciting stigma reactions, and by varying degrees of communicative deficiency.

Both discreditable and discredited respondents employed what little room for manoeuvre there was, generally by recourse to face-saving neutralising devices such as rationalisation, the selective choice of targets, and the strategic confinement of requests to very specific situations. They were differentially effective, as expected, according to adherence to comm

Some discreditable respondents were more fortunately placed than others. Mrs. A.B., herself in a supervisory capacity, remarked: "If someone is particularly difficult to understand, I'd have to ask someone to do the interview for me. There are many ethnic minorities here. Sometimes peoples' voices are difficult".

It was not a strategy, however, she used unless in extremis. Her own position, nevertheless, allowed her to use face-saving devices such as the pressure of administrative work to 'cover'. Both her communicative competence and salience of resources are at issue here. In nice juxtaposition to this Mr. N.M., also in a supervisory post, stipulated "Above! Not below!"

if he needed help.

Similarly Mr. B.U. was just able to have recourse to explanations to deflect imputations of ineptitude. However this was not a strategy on which he could rely continuously. Exposure of his incompetence regarding phone management was a constant source of shamefulness to him, and tended to override any positive definitions he was able to impose of himself in other spheres of his working life. As has been frequently noted the power of stereotyping literally to obliterate any positive qualities on the part of the stigmatised accounts for both the denial of heterogeneity amongst its victims, and its power to depersonalise. As far as phone management was concerned, Mr. B.U. often became an example of 'nothing but' his impairment. Thus his excuse: "If I can't cope I'll ask someone to take over the phone. Say something like 'It's a bad line'"

does not carry credibility if used repeatedly.

These were not strategies available even to all discreditable respondents. For Miss B.G. the pressures of her job were so insistent that asking, and thus constantly drawing attention to her 'imperfection', was imperative if she was to perform her job properly. As she noted: "In this job I can't afford not to/ask/. You've got to get food out at a certain time ..If someone yells and I haven't heard in all the hubbub...".

Demonstrating competence at her job took priority over a possibly tarnished image. But the hope that one would cancel out the other simply does not take cognisance of the master status phenomenon

arising from her impairment.

For discredited respondents, any strategy management took the form of careful timing of requests, such as that of Miss M.A.: "Choose my time. If busy, no. If free, I'll ask"; a policy borne of many rebuffs when requests had been made at ill-chosen moments. And Miss R.C. attempted to confine repeated assaults on her self-esteem by limiting her requests to "meetings only". The incorporation of the image of "not being worth the trouble" which requests for help had often elicited was simply too much at variance with the retention of any definitions favourable to self. Strategic avoidance was thus common.

Constantly having to take the role of helpee denigrates. In the work situation, anything which might reinforce images of ineptness, or incompetence is, if possible, avoided. Attempting simultaneously to maintain an acceptable role in the hearing world, yet asking for help, seems to be perceived as a tacit admission of failure on the part of respondents, and reduces the effectiveness of other attempts at strategy management. Sensitised to the probability of being evaluated as incompetent which requests for help have been shown to elicit socially, this would appear to be a long introjected response carried over into the field of work.

The problem of exactly how to solicit help with no acceptable vehicle of communication, from a workforce which has studiously and systematically segregated her from any kind of participation is poignantly illustrated by Miss P.K. Mrs. P.K., commenting of her daughter, said "Sometimes deaf doing a job and want something. How does she explain what she wants?" P's status, as far as the work domain was concerned, appeared fairly well sealed. Defined as virtually 'beyond the pale', role engulfment for Miss P.K. appeared to be near complete at work. Yet this did not by any means signify apathy or total capitulation in the verdict of others, in all areas of work, or in other life domains, as I have indicated before. Asked by her audiologist, for example, whether she had "noises in her

head"* . P. reacted, to the effect "What do you think I am? Effing daft?"
- as related by her mother.

2. INSTRUCTIONS: A FORM OF SOCIAL CONTROL

(a) Being Told What to Do.

A familiar pattern of stigma reactions - from irritation and impatience to minimal communication and segregation - were in evidence in relation to the business of being told what to do. Being unable to follow instructions very quickly brought into play stereotypes of incompetence and incapability, although these varied, as expected, with skills in communicative performance. Again, efforts at communication on the part of hearing colleagues were perceived as minimal, if virtually non-existent, in some cases. Variously deprived of the means of orientating themselves sufficiently in the work situation merely reinforced images of generalised incompetence. Discredited respondents, particularly, found themselves continuously on the losing end of stigma contests in this respect. It is fruitful to look particularly at the receipt of instructions as a specialised form of 'talk', and thus of social control.

(i) Coping with Verbal Instructions

For most respondents, as far as being on the receiving end of instructions was concerned, it seemed the emphasis was concentrated rather on the pragmatic task of achieving clarity and accuracy of instructions than any apparent appreciation of the more denigrating aspects of truncated notes and pantomime, which tended to be the lot of discredited respondents. (This is an area which merits further attention).

For those in Groups I and II, it was usually a matter of checking and clarifying whether mistakes and misunderstandings might have occurred.

The fact that most respondents did check indicates well the situational

* Tinnitus: "Ringing, buzzing, or roaring noises in the head" (FREEMAN, CARBIN and BOESE (1981) - particularly affecting the sensori-neurally deafened.

nature of deviance defining and strategy management. It is in interesting contrast to the previously discussed disinclination to ask for help. Possibly the latter is too bound up with connotations of helplessness. Being told what to do is an acceptable way of learning a job.

The question "Do you ever pretend you've heard and understood something when in fact you haven't?" occasioned rueful laughter amongst many respondents. However 14 respondents from these Groups maintained a distinction between situations where they would allow remarks to pass unheard (generally socially), and those where a deliberate and painstaking effort was made to ensure understanding, generally where accuracy of work performance was at stake - thereby revealing their 'imperfection'.

Thus passing was not a strategy that could be consistently maintained under such circumstances. As with asking for repeats socially, disclosure of not understanding risked imputations of stupidity - and more. As Mrs. C.O. said in response to the question: "Many times. But at work you can't take that chance. I check and re-check"

thus situationally revealing her impediment she was at such pains to conceal.

Communicatively deviant respondents were also aware of the ramifications and further deviant outcomes which could arise from not checking. Although disclosure was no longer an issue for Miss A.L.,(V) for instance, the provocation of irritation and impatience at possible mistakes most certainly was. As she remarked: "It's essential to get the answers right at work. If I just guessed and it was wrong, it would be very bad for you".

Nevertheless, some limited room for manoeuvre was sometimes available, arising from the interplay of communicative skills and the very nature of some kinds of jobs. Nothing can be further from labelling critics' assertion of passive apathy under the weight of applied labels than these often small, but highly significant and often ingenious attempts made by respondents to negotiate favourable outcomes for themselves in a situation not characterised by its flexibility or controllability.

Thus, two discreditable respondents employed a mitigating device

relying on the re-emergence of a subject in conversation if it were sufficiently important. (Although not strictly related to 'being told what to do', it is concerned with the issue of being given cues to enable one to perform the job effectively). Mrs. A.B. commented: "In social situations I'd certainly let it pass. At work I think you can probably pick it up later. It will surface again if it's important enough" - a device similarly employed by Mr. S.W. Both respondents were employed in the social services professions, where reliance on this kind of stratagem stood a fair chance of succeeding.

As noted earlier, ironically, noise on the factory floor appears to give some protection to the hearing impaired worker from being singled out as socially incompetent - or, in this case, inept in the understanding of instructions. If everyone has difficulty in hearing, then, as Mr. C.R., Mr. W.C., Mr. S.G. and Mr. B.T. found, communication is minimal for all workers. Instructions given by gesture which, in other situations would immediately mark one out as undesirably different, are perfectly acceptable under these conditions. As Mr. C.R. remarked: "The Assistant Inspector makes signs if the noise level's high. He taps me on the shoulder - once for a small packet and twice for a large packet. He does it with everyone".

Other work situations, however, did not always lend themselves to this kind of cover". Other respondents were acutely aware of the irritation likely to be engendered where instructions had to be repeated, and often had little with which to directly combat imputations of incompetence, stupidity and ineptitude. It was a constantly recurring theme. As Mrs. B.L. commented: "When you're new on a job and people don't know you, people 'baby-talking' at you".

The hearing impaired are not seen as capable of managing 'adult' talk.

As noted earlier, the anticipation of being thought slow or stupid, if internalised, increases the likelihood of the process becoming self-confirming, possibly eliciting the very behaviour in question. Mr. E.B. (at first interview) had been deterred from even trying to negotiate more favourable definitions of himself in his present work situation. Even

his literary sophistication could not neutralise the impact of imputations of stupidity to which his speech deviancy gave rise. He remarked:

"Because you're deaf, they say you're not so bright or quick. I'm obviously not so quick. But I can solve things if given a bit longer. I don't want to be seen as slow. It's embarrassing. The result is that I don't do anything ... If they liked me and valued what I can do they wouldn't be so inconsiderate as to say I'm slow".

- thereby neatly encapsulating the snowballing nature of the deviance defining process.

However, as noted in the case of Miss P.K., the danger of regarding this internalisation as fixed and immutable over all times and all situations, cannot be too strongly stressed. The temptation of doing so was heightened by my practice of interviewing respondents perhaps over a weekend, or twice in close succession. However well internalised surface acceptance of deviant status might appear to be, it was only when I embarked on corroboration interviews nearly a year later that the essentially dynamic nature of strategy management became clear to me: witness the quite altered perceptions Mr. E.B. held of his situation after his appointment as voluntary organiser of his local Breakthrough Club.

Thus, capitulation in the common stock of stereotypes, equating deviant speech performance with slowness and stupidity, can really only be described as a form of partial role engulfment, however 'total' it seemed to the respondent in question at the time of interview. And many respondents did indeed feel this way. Both self-concepts and behaviour were seen to be focussed increasingly on the deviant role.

Stereotypes were sometimes apparently so effectively internalised that two respondents, Mrs. A.H. and Miss N.P., actively felt their tardiness in picking up instructions as a handicap to their firm's productivity. As Miss N.P. commented: "Employers think they don't get the same output from a deaf person. They have to spend twice as much time explaining".

Stigma reactions of irritability and impatience affected both discredited and discredited respondents. However, the nature of stigmatising became harsher as communication skills deviated increasingly from expec-

tations. Vulnerability to exposure from mistakes is greater. Repercussions on discovery may have direct further deviant outcomes in the form of jeopardising job security.

Although recourse to accounts and explanations, or talking one's way out of a 'botched' job became increasingly unfeasible, as suggested in Chapter 5, it seems that marginally more tolerance is shown in response to mistakes arising from misconstrued or unheard instructions than to those arising out of specifically mishandled social exchanges at work. It will be recalled that only Mr. F.J. (III) and Mrs. E.I. (II) commented on the potential for trouble which instructions have caused. As the former noted: "Instructions are a problem. I've said 'yes' to an answer (sio) which demanded 'no'. There've been repercussions. It can blow up into a big issue. Instructions just haven't registered".

As I have argued, trouble was largely seen as a result of socially related interaction going awry.

(ii) Writing and Gesture - an invisible deprivation

With respondents in Groups IV and V instructions increasingly had to be either written down or gestured. It is here, I contend, that the application of stereotyping in conveying instructions is most apparent, although it was less perceived to be so by respondents. Again, this is an issue which merits much more attention than I gave it. Its significance only became apparent at a later date. Thus the following is conjecture only. The deviant outcome, however, is in no doubt: that of exclusion.

I suggest that writing and gesture carry their own in-built penalties, and effectively reinforce any stereotypes of the hearing impaired as mentally incapable. To be seen having recourse to such measures, particularly gesture, is possibly a shaming experience. When 'gesture' can be used so fluently in the creation of a language, crude pantomime is possibly doubly offensive to signing respondents.

Later I ascertained this was probably a correct supposition.

Dorothy Miles (1982) told me: "I have felt annoyed in the past. When I can lipread and the work is verbal in nature".

She went on to say "I've known many deaf people laugh at hearing employers when they try to make gestures".

This is indicative of one of the many small manipulations, analagous to regarding hearing people as lazy and stupid, as expressed by Mr. D.S. and Miss R.C. previously, which in effect displace the stigma on to the definers. As SCHUR (1979) has noted: "...branding the opposition as constituting the problem is always an implicit feature of stigma contests".

Similarly, demonstration implicitly takes for granted the simple and specific task level at which the hearing impaired are expected to function. It is clearly limited in the opportunities it gives for clarification or feedback; and it effectively excludes the transmission of other kinds of verbal information, regardless of whether the hearing impaired recipient is able to receive such information, thereby again stigmatising - by omission.

Writing is traditionally the mode of conveying instructions to those hearing impaired with deficient receptive and expressive skills. It is not, however, actually liked, particularly by the signing deaf, according to NASH and NASH (1978). Miss H.Q. (V) was possibly somewhat atypical in that she was in charge of two hearing trainees. Herself in a superordinate position of having to convey instructions, she perceived writing simply as a pragmatic issue: "For complicated instructions both ways, write. Make sure understand".

It is mere speculation, but had she been solely on the receiving end, as were the other signing deaf colleagues in the sample, it may well have proved more onerous and distasteful to her.

Whilst writing is an accurate means of exchanging information, it is also time-consuming and cumbersome. A full explanation is usually omitted. For signing respondents, where BSL syntax is at variance with written English, misunderstanding and, as SMITH (1979) suggests, the under-rating of a deaf person's intelligence usually ensue.

Moreover, as a socially controlling device, it is similar to the selective filtering of information orally, which I noted earlier.

Not that the more familiar stigma reactions of irritation and impatience were absent at this level. As Mr. M.C. noted: "Although colleagues feel more at ease with me if they write ... Pencil and paper provokes irritation".

His boss, however, is seen as playing a "protective role" in this respect. "He sees I'm not involved in any jobs involving communication". It is conceivable that, given appropriate equipment, Mr. M.C. is capable of handling an infinitely more complex range of tasks than his present job demands. The role of his boss as an intermediate definer of his capabilities (or 'incapabilities') is very effectively masked, so that enacted stigma was not apparent to the respondent.

Conceivably more awareness of felt and enacted stigma was shown by those discredited respondents, profoundly prelingually orally deaf and functionally illiterate. Mrs. P.K. commented on how the onus of instructing her daughter had been shifted by the firm on to her other hearing daughter. Logical, perhaps, but indicative of the little regard in which she was held. "Daughter shows her what to do. Then she just gets on with it".

A one-off demonstration and then being "left to get on with it" was characteristic of how instructions were communicated to Mrs. F.S., Mr. C.S. (when in work) and Mr. D.S., although a little extra trouble seemed to be taken with the latter respondent. His mother commented: "His boss will write or do a little drawing. Taps his shoulder. Shows him. Points things out. Then D. goes off and does it".

Although his literacy skills were badly retarded, his ability to follow quite complex circuit diagrams has been virtually ignored by his employers, although "good to him" in other ways.

Again the pervasiveness of the master status phenomenon is evident. Discredited respondents were not expected to possess any positive attributes. The very function of the labelling process ensures, as ZAKAREWSKY

(1982) notes, that people lose their values as "whole/particulars" and become stigmatised as "part/universals". In the work situation, the depersonalising functions of stereotyping and the denial of the heterogeneity of individuals are very vividly illuminated. Any attributes the stigmatised victim might possess are routinely and 'legitimately' by-passed, and the individual characterised as an example of 'nothing but' his hearing loss.

Finally, it must be stressed, parenthetically, that respondents were not unaware of the intrinsic limitations of their disability. For Miss A.L. (V), returning to her old job as a copy typist after being totally deafened, she commented: "If someone had had to instruct me on something new, it would have been a struggle .. It's just harder work communicating instructions to someone who's deaf".

Harder work, perhaps, but not unamenable to solutions and remedial action, which a positive evaluation of capabilities would promote. Quite probably Miss A.L.'s own negative attitude is at least partially attributable to the incorporation of cultural stereotypes about 'the deaf' with which she had been familiar all her life until adventitiously deafened herself relatively late in life. The danger of confusing intrinsic with extrinsic limitations - and thus legitimating the latter as 'insuperable' has been dealt with at length elsewhere.

Suffice to note, the tendency 'not to bother', the use of baby-talk and crude pantomime in the reduction of communication to an absolute minimum necessary only for task performance, were sufficiently commonplace happenings in the lives of respondents to suggest that much more is at issue than an 'understandable' response to primary hearing loss. Ascriptions of incompetence and incapability are part of the much wider disabling process.

Thus, both discreditable and discredited respondents were, in varying degrees, denied access to the on-going pool of taken-for-granted information available to the hearing. Whilst the former were, to a limited extent, able to manipulate the situation to deflect grosser imputations of

incompetence, the latter's abilities were rated so low as to legitimate widespread avoidance and exclusion from access to knowledge and information. It represents a most powerful form of social control exercised by both informal and intermediate definers. Its effect on exclusion from participation in wider economic goals will be demonstrated. As shown, the possession of 'standard' communicative competence is very much bound up with the issue of power at these levels.

(b) Telling others what to do: "You're not expected to supervise"

Relatively few comments were made about the business of conveying instructions, largely because so few respondents had actually had direct supervisory experience (3 in Group I, 2 in Group II and 1 in Group V). The hearing impaired respondents in this sample neither perceived themselves, nor were perceived, as 'suitable' for such responsibility. Remarks which were made, therefore, tended to be speculative, but nonetheless significantly illustrative of the negative way in which their capabilities were seen to be evaluated by others. A much greater awareness of the devian-tising process was apparent, than in the much more common situation of being told what to do by others, particularly by discreditable respondents.

Of those 6 respondents who did supervise others, or who had done so in the past, only Mrs. L.L. (I) and Miss H.Q. (V) found it unproblematic. For Mrs. L.L., as a lipreading tutor, supervising trainees, this was perhaps not surprising. She noted: "There are no difficulties because they are uniquely equipped to understand".

The salience of Miss H.Q.'s resources have already been commented on in other contexts. She had managed to earn 'courtesy respect' sufficient to allow her to have responsibility for hearing trainees, but she was well aware that this was as far as tolerance limits would allow.

The other 4 respondents varied in their assessment of the difficulties involved, which ranged from the perceived necessity of making special efforts (Mr. S.W.), to the feeling that giving instructions demanded partic-

ular social as well as communication skills (Mr. L.M.), to the timing of the onset of hearing loss (Mr. N.M.) The latter, for example, was emphatic about the importance of the relatively late onset of his deafness:

He commented: "Experience pulled me through. If I'd lost my hearing shortly after taking a position in a supervisory capacity I wouldn't have been able to do it ... if I'd been younger, without experience .."

The significance of internalisation of secondary deviant outcomes such as the lack of self-confidence, and perceived "lack of leadership qualities" (Mr. L.M.), which exposure to the potential or actual stigma reactions of others often incurs is confirmed by the speculations of those respondents who had not had the experience of telling others what to do. It was apparent that even discreditable respondents had introjected many of the stereotypes applied to their colleagues whose communicative skills were defined as deviant.

The anticipation of being negatively evaluated as a prospective candidate for a supervisory post was often in the nature of a self-fulfilling prophecy. Respondents were not only deterred from applying for posts which carried supervisory duties. The master status phenomenon of hearing impairment had sensitised them to the stereotypes regarding global incompetence which they felt they would be likely to encounter. Thus 2 Group I respondents (Mr. P.E. and Mr. A.E.) commented on the equation of hearing loss with lowered status: Mr. A.E. noted: "I could visualise in giving instructions a deaf person becoming a second class citizen".

As deviations from acceptable communication patterns became more marked, the perceived evaluations of others became increasingly detrimental to the retention of a positive self-image in this respect. Thus Mr. H.H. remarked: "Hearing people don't like 'less able' people telling them what to do".

As discredited status became obtrusive, the question of being in charge and giving instructions to others was hardly commented on and, in some cases (Mr. C.S., Miss P.K., and Mr. M.R.), it seemed almost offensive to ask.

Yet Miss H.Q. has demonstrated that this is by no means insuperable. Once again one is faced with the issue of confusion of intrinsic and extrinsic limitations of hearing loss, the latter acquiring the status of 'insurmountable obstacles', justifying exclusion. As argued, a little ingenuity and flexibility, plus the necessary positive evaluation of a hearing impaired person's capabilities might well reveal such 'obstacles' to be no such thing. As noted earlier, this is not for one moment an excuse to fall into the trap, noted by some labelling critics such as AKERS (1968), GIBBS (1966 and 1972), of denying the 'reality' of the behaviour or condition. The much greater danger lies in ignoring the social context in which such judgements operate. I have argued, for example, in the case of exclusion from gossip, that far from being a natural and inevitable state of affairs, it precisely illustrates the operation of the processes I have been discussing all along. Were the hearing impaired not the objects of stereotyping and concomitant stigmatising, I contend that many such 'obstacles' would vanish.

Equally negative evaluations of the capabilities of the hearing impaired as a group permeate other work-oriented activities, notably the telephone.

3. "THAT'S FOR HEARING PEOPLE"

(a) The Phone as 'Insurmountable Obstacle'

As BENDERLY (op.cit) comments: "The telephone has more effectively barred the hearing impaired from the life of the general community than any other factor".

She was commenting generally. In the work situation it has been critical in accounting for the depressed economic position as perceived by many hearing impaired workers.

The phone is one of the key areas where all hearing impaired tend to be tainted with similar imputations of incompetence. It was quoted repeatedly as the critical obstacle in the attainment of otherwise quite modest

ambitions. It is significant that together with a closely related area, that of promotion, they proved to be the two aspects of the employment situation where communicative competence and salience of resources made the least difference to outcome.

As far as phone management is concerned, a more formal, stylised mode of speech performance - a 'good telephone manner' - is at a premium. That this is evidently automatically viewed as being inconsistent with hearing loss, almost regardless of the communicative competence of the respondent in question (receptive and expressive), attests to the commonality with which hearing impaired respondents tend to be uniformly classified and categorised. Its use was only permitted for discreditable respondents who managed to normalise their working lives fairly successfully. (Even here, there were many exceptions). And for discredited respondents, the question of phones was evidently dismissed out of hand as a totally unfeasible proposition.

Yet in the States, not only are TTYs (and increasingly, Vistel) in widespread use; their installation, or the provision of alternatives such as interpreters, has legislative backing. The question of denial of opportunity because of 'deviant' communication skills is at any rate legally proscribed.

Perhaps a rather ironic paradox is at work here - and one with which I shall be particularly concerned to examine in my concluding chapter. BENDERLY (op.cit) has noted that the development of TTYs in the States had a quite unforeseen effect: "It showed hearing impaired people of all ideological persuasions and social situations the basic and overriding commonality of their political interests".

As we shall see, this is not a commonality which has been capitalised upon either by the profoundly prelingually deaf themselves, or by their less seriously impaired colleagues in the UK.

Where the use of the phone played an integral part in the performance of a job, difficulties in its management and the reactions these

elicited caused a range of deviant outcomes - from secondary outcomes of strain, embarrassment and humiliation at mistakes, to abandonment of its use (whether by a respondent's own 'volition', or employer intervention). Only Mr. N.M. was able to normalise the situation when phoning became problematic, with the use of a third party to help out. It was not a suggestion made available to other respondents.

Further deviantising occurred from an inability to handle the phone unaided: regarding the quality and nature of the job itself; its effects on upward mobility; and on the ability to handle a job at all. Its deterrent effects on the application for jobs have already been mentioned. These outcomes will be discussed following an exploration of the meanings difficulties with the phone held for various respondents in terms of secondary deviant outcomes; and the response to requests for amplifiers.

(i) Strain, depleted self-confidence, and 'spread'.

Secondary deviant outcomes - strain and feelings of inadequacy - were voiced by discreditable respondents who were still just sufficiently communicatively competent to 'carry off' phone duties. Handling the phone occupied much of Mrs. C.O.'s working day. However, the strain of coping with phone work against a constant backdrop of office noise in an open-plan office was an additional headache. She remarked: "It undermines your confidence. There are times when you're tired and give the wrong answer. People think you're stupid or queer in the head. There's always this feeling of inadequacy. It takes me so much longer to do the calls".

Yet there were no attempts to alleviate the situation, by, for example, locating the phone in a side room, or the offer to instal an amplifier.

A similar lack of accommodation was characteristic of Mr. B.U.'s situation until very recently.* However, this remained the one and only attempt to alleviate the situation. The provision of a TTY or Vistel, or an intermediary, are evidently not seen as being 'cost effective'. To be * After over a year's employment, an amplifier had been installed, but evidently in total ignorance of his fairly severe (but asymmetrical) sensori-neural deafness. The amplification of sound is thus likely to facilitate only marginally what he lacks - speech discrimination.

thus defined and categorised is stigmatising in itself. It also very neatly masks the fact that the label attaches to the person, insidiously legitimising the status quo by appearing to have at stake concern with equipment.

As noted earlier, despite his near normal expressive communication skills, his educational qualifications, and a fair amount of personal assertiveness, Mr. B.U. was unable to impose more favourable definitions of his capabilities on his employers. However, further deviant outcomes, in terms of restriction on career prospects, were denied at interview. Nevertheless, deviantised at this level, any movement becomes problematic. He could not penetrate the phone barrier with his other undoubted attributes. Yet, like Mrs. C.O., phoning took up a large part of his working day. He readily conceded he made mistakes, and commented: "It makes your intelligence look smaller. Say I take a phone call and I say to my supervisor 'It's Inspector Spooner from Catford' when it's Inspector Sponner from Deptford. The supervisor approaches the phone with the wrong expectations. It doesn't reflect very well on you, even though people are sympathetic".

Feelings of inadequacy and anxiety were voiced by Mrs. A.H. (I), similarly communicatively competent. Referring to her previous employment in a bank, she remarked: "Being a top-class bookkeeper, I've got to use the phone. But because I can't hear perfectly well I feel handicapped. I couldn't pick up the spelling of names quickly. Colleagues were sometimes grudging about having to do my work over the phone .. It affected my confidence in dealing with the job .. Finally, things got to the stage where every time the phone rang I ran away so someone else would pick it up".

The sequential, or amplifying nature of the deviance defining process is well illustrated, both in the incorporation of feelings of inadequacy and anxiety, as well as in the blocking of any further progress (Mr. B.U.). For Mrs. A.H., internalisation of the deprecatory definitions of others actually precipitated the behaviour with which she was attributed, thus reinforcing the stereotypic images society already has of the hearing impaired as incompetent and inept.

(ii) Amplifiers: "We can't mess about with these"

Given such feelings of anxiety and strain, the provision of amplifiers would seem an obvious solution - certainly to those respondents with conductive loss, or sufficient residual hearing to benefit from amplification. Yet few employers (Mr. N.M.'s and Mr. B.U.'s apart) availed themselves of the opportunity to encourage their hearing impaired staff to apply for them. And significantly, other respondents were too frightened to ask. When such a simply and relatively inexpensive device could radically transform the working life and performance of an employee, the unwillingness of employers represents a significant attempt at social control of a stigmatised minority. Definitions of incompetence were at their most salient in respect of this issue.

It was Miss A.S. (I) who commented reflectively on how attitudes towards the installation of phone equipment illustrated the 'spread' effect of negative perceptions of all hearing impaired employees. (Having worked with the deaf in a social work capacity, as well as being marginally impaired herself, her comments are particularly instructive): "They think they've done you a big favour by taking you on. It's the attitude 'How dare they expect more?' If they valued you enough, they'd make it possible. It depends on a lot of things, how long you've been there, acceptance, occupational status, how much you are liked..."

Generally, attempts to negotiate the installation of telephone equipment (or a substitute) in order to facilitate and enhance job performance and opportunities either met with rejection, or, such were the expectations of a 'brush-off', no attempt was made (Mrs. N.F. excepted).

Mrs. D.H.'s (I) experience is salutary and illustrative of the tenacity with which stereotyping is adhered to, even in the face of strong evidence to the contrary. I contend that the continuous experience of tension-laden interaction reinforces, rather than modifies, stereotypes. Once established as a 'faulty interactant', even discreditable respondents may find themselves ignored or avoided in subsequent encounter areas, thus lending further substance to the tentative findings from KLECK's (1969) experiments. Retrospective interpretation appears to take place even for

a once-valued employee. Her request for an amplifier had met with the following response from an otherwise "sympathetic" boss: "I was told 'There's plenty of people able to answer the phone. We can't stand all that fiddling about. It's not necessary'. I felt a bit rebuffed. I didn't ask again".

The implications for the nature and quality of her working life have been depressing for her, reinforcing her tainted self-image, which she preserves fairly intact from imputations of stigma in other respects. "I feel embarrassed now. I used to speak to buyers of big firms. They say 'Why don't we speak to D. now?' and the boss has to tell them".

Two other discreditable respondents (from Groups I and II) had had similarly adverse experiences, reinforcing an already precarious sense of self-esteem (Mr. S.L. and Mr. P.E.) As Mr. S.L. explained: "I've had long discussion whether I could do a legal job with head phones, loops etc. No firm was ready to provide one"

- this despite his very formidable qualifications and intellectual ability.

The preservation of expressive communicative skills was insufficient to dislodge employers' expectations of generalised incompetence. Illustrating my own particular contention, he commented later: "All it requires is a preparedness to recognise that if they made even minor alterations, they could get as much out of (a) as (b)".

Anticipation of rejection and internalised feelings of incompetence were such as to deter Mrs. A.H. from even asking. Describing its significance for her, she commented: "I felt backwards asking for something like that".

An interesting example of what amounts to a confrontation with one's own stereotypes is Mrs. A.B. (I) who is responsible for hiring (and making recommendations for firing) in her own particular office. She commented: "If I had a good candidate /for the office/ but with a hearing loss which meant she couldn't cope with the phone without the installation of an amplifier, I wouldn't push for an amplifier. /HQ/ wouldn't give me the money".

Even when I pointed out the Department of Employment's Environmental Aids scheme, she remained adamant. Possibly two factors are operative here: the psychological toll involved in concealing her own impairment which she does with consummate skill, when phone duties have to be conducted against a background of loud traffic noise. However, I suggest a much sounder

explanation lies in her facing, and complying with, the stereotypes of hearing impairment with which she had grown up and unconsciously absorbed into her common-sense stock of knowledge. It bears out the contention of SCOTT (1969) concerning the vulnerability of her identity to attack both from within and without. Her ability to rationalise made her supremely unaware of her power to deviantise, and her dual status as both definer and potentially defined.

There were two exceptions to this general picture, where strategy management for both discreditable and discredited respondents 'paid off'. For Mr. N.M., relatively communicatively competent, his comparative immunity to imputations of stigma has already been mentioned. He commented: "It was at the employer's instigation to get an amplifier for the phone ... In no way have I been made to feel inferior".

Stigma, I reiterate, is not universally applicable. As noted earlier, Mr. N.M.'s middle management position in a small, sympathetic firm may well have contributed to a positive evaluation of his capabilities. In addition, the salience of his own resources is important, in that he was determined not to incorporate the stereotypes about 'deafies' which had initially undermined his confidence on being adventitiously deafened. His ebullient personality has enabled him to facilitate normalisation of social relationships at work. His two Directors, one of whom, significantly, is familiar with impairment, "have taken it in their stride". He is the only respondent in the sample where job modifications and re-structuring have been done virtually automatically.

Discredited Mrs. N.F. is the other exception, in that she has gone a stage further: she is the only member of the sample to have successfully negotiated the use of a TTY for her job as assistant social worker. However, as she said "I had to fight for it". Additionally, it does not resolve all her problems: "It's time-consuming and colleagues would still prefer to take messages .. Its use will be restricted almost purely to work. So few clients have got them".

However, in the work situation, Mrs. N.F. has regained some of her untainted self, indicating again the situational nature of deviance de-

fining and the infinite possibilities for strategy management. Yet deprecatory definitions of her abilities are not entirely stilled. The reserve of her social worker colleagues and their somewhat patronising treatment of her, discussed in the previous chapter, indicates her acceptance is far from complete. It illustrates the extreme difficulty with which a stigmatised identikit can be discarded, a difficulty more often discussed in the context of discharged 'mentally ill' patients (cf. ROSEHAN, 1973), but equally applicable here. Nevertheless, at the time of interview (June 1981), she must be one of a very small number of communicatively 'deviant' hearing impaired people in the country to have negotiated the use of a TTY for her job - and this despite not having achieved full social worker status.

That it can be achieved, transforming the quality of a discredited respondent's working life, is in stark contrast to those other respondents, whose difficulty or inability to use the phone in conventional fashion is all too often translated into personal inadequacy and incompetence, and their potential minimised or obscured. Concomitant deviant outcomes in terms of a reduced quality of life at work, and exclusion from access to occupational goals generally follows.

(iii) A reduced quality of working life

The impact of exclusion from phone duties on the nature and quality of working life was often perceived to be depressing. Restrictions on the nature of the job have been implicit in comments already made by Mr. B.U. and Mrs. D.H. It is poignantly illustrated by Miss A.L. Returning to her old job to find phone duties 'tactfully' removed, she said: "I'm really lost without the use of the phone. I miss answering it. It used to make a little break from just typing. People don't write these days. It's all phoning".

Respondents were well aware of the further deviant ramifications exclusion was to have on longer-term prospects. The restrictive impact on the closely related area of promotion was commented on by 3 respondents,

Mr. L.M., Miss B.G. and Mr. M.C., and will be discussed in greater detail later in this chapter.

It would appear that respondents from all Communication groups perceive themselves to be evaluated in a way as to suggest that they occupy insufficiently important positions in the work hierarchy to warrant special concessions . The sequential - almost circular - nature of deviance defining is important again here, and a deviancy amplification or spiralling paradigm is useful to illustrate the process. If phoning competence is deemed to play such an important role in effective job performance, exclusion from it leads to a diminished quality of working life and status, which is then legitimated as an 'obvious' consequence of primary hearing loss. The actual processes involved which make for exclusion are conveniently obscured. The hearing impaired are then rationalised as being 'incapable' of holding down better jobs. Thus employment at a more elevated level which the installation of TDDs might well promote, is not 'justified'. Stigma creates stigma which creates stigma. Thus initial negative evaluations set in motion a further sequence of prejudicial definitions, so that the deviant outcome - jobs involving the phone are not for the deaf - becomes part of the common-sense stock of knowledge, and a judgement which many hearing impaired respondents themselves subscribe to. It was Miss M.A. who put her finger on some of the underlying issues. She signed with some prescience: "True. At same time excuse".

Strategy management was generally severely curtailed as far as phones were concerned. Remediation which might have enabled some respondents to manage the situation was conspicuous by its absence. For discreditable respondents, secondary deviant outcomes in the form of strain, embarrassment and sometimes humiliation were routine. And for those whose ability to cope unaided was marginal, the matter was often simply taken out of their hands, their 'incompetence' exposed for all to see. For discredited respondents (Mrs. N.F. apart), the question rarely arose, except in the

shape of a general deterrent.

It was significant that communicative competence, as I have used the term throughout this thesis, was of such little relevance here, even when combined with salience of resources. Negative definitions tended to be universally applied, and their effects generalised outwards to encompass all other work competencies.

As the phone rated so significantly in respondents' comments about work, I have devoted some considerable space to discussing it as an 'insurmountable obstacle'. What is so disheartening is that both definers and defined generally perceived it as such. Stereotypes are well and truly internalised in this area of employment.

(b) Meetings: A Case of 'doing solitary'.

Finally, in dealing with the additional hurdles which employment places on demands for communication skills is the question of participation in meetings. However, partial or total exclusion was the rule here too, in a similar way to the other aspects of work life I have been discussing. I suggest this can best be regarded as an extension of the exclusion experienced by respondents in their group social life, both in and outside work. However, for effective participation in groups at work, additional communication skills are required. As with the possession of a good telephone manner, speech performance tends to be more highly stylised and less reliant on the kind of taken-for-granted 'filling-in' characteristic of more informal group dialogue. Thus, although access to participation in meetings tended to negatively affect most hearing impaired respondents, discredited respondents were additionally penalised for the absence of 'standard', 'correct' speech (if speech were possible at all).

Again, participation in group discussions tended to be viewed by respondents, as well as their hearing peers, as another of those 'insuperable obstacles' - as a further inherent limitation of hearing loss. Much of

the literature supports such a viewpoint, and indeed it would be quite idle to deny the existence of genuine problems.

CRAMMATTE (1968), BIRD and TREVAINS (1978), BENDERLY (op.cit) and TREVAINS (1982) describe them: namely, strain and fatigue; difficulties in following if the speaker's head is momentarily turned aside; catching the sotto voce exchanges which are generally characteristic of meetings; and the difficulty of following rapid 'cross-fire' talk.

Few respondents attended meetings on a regular basis. The necessity of doing so was, of course, a function of the job. For those employed in semi-skilled and unskilled posts at factory floor level, meetings, if any, were usually confined to Union meetings.

And yet, once again, even with the problem at its most 'insuperable', need this be so? The combination of equipment and the use of an intercessor enables Jack Ashley (ASHLEY, 1973) both to follow and contribute to debates in the House of Commons. Whilst the posts of my respondents were considerably less elevated, is it inconceivable that similar accommodations cannot be made? The experiences and perceptions of respondents in my sample attest both to the general lack of accommodative devices, at both personal and technological levels, the reluctance of colleagues to 'bother', and of the stigma reactions which are now becoming a familiar response to requests for inclusion: impatience, irritability - and ultimately, rejection.

Although Miss C.G. agreed that at office meetings an agenda was "usually available" (a strategy used by Miss V.G.), and that she "would ask the person next to me to fill me in", little effectually was done to help, and requests for repetition - as noted in general social interaction at work - elicited negative reactions. She commented: "It's like listening to a foreign language. Or if people speak too fast .. I can't ask too many times for people to slow down or repeat - not at meetings. People get so exasperated. So you have to judge it".

There were some exceptions. For Miss V.G. and Mrs. G.L., their

communication skills and salience of resources (chiefly professional status) were such that they were able to manipulate the situation so that some participation was achieved - but at a price. Both respondents, who normally passed socially, and very often managed to do so at work - were aware of the penalising effects of repeatedly drawing attention to their 'imperfection' and of the general pejorative evaluation which disclosure incurred. Again, a delicate balance had to be maintained between the desire to understand and the risk of eliciting stigma: 'incomprehension' in this, as in other employment settings, being strongly equated with incapability.

Mrs. G.L. at corroboration interview explained the difficulties, the precarious nature of the strategies she pursued, and the anticipated stereotyping requests for repeats produced. "If I've been sitting in a staff meeting, often conversation's coming at you from three different directions. I can only concentrate on the immediate person. So I position myself beforehand so that this doesn't happen. It doesn't always work. So I have to say 'sorry, I can't hear'. I prefer to avoid this. Possibly it would seem you're behaving like the village idiot - you get shouted at or people use baby language, you know, words of one syllable ... I would ask if I was lost out but I wouldn't want to keep asking".

Miss P.L. was one of the few respondents specifically to identify the bearing others' attitudes had on whether or not a hearing impaired person was permitted access to such work activities, and, more importantly, whether trouble was taken to enable him to benefit from them. She commented that were she to participate in meetings "It would need a lot of understanding from other people .. So much depends on the attitudes of employers".

It is, as has been argued, precisely the negative attitudes of others which are seen as precluding a willingness to find ways out of both real and apparent difficulties. The master status of hearing loss, and its equation with stupidity and incompetence, effectively obscures any positive attributes the stigmatised victim may possess. This affects discreditable and discredited respondents alike, as Mrs. L.L. (I) found to her cost.

Ascriptions of incompetence were particularly galling to one of her capabilities. She had "stormed out of meetings on more than one occasion". She commented on her experience attending a course for adult teacher training. Although not strictly germane to employment, I am including her comments as she only agreed to talk to me on the subject because, as she remarked, "This is what it must be like for people at work".

She described her experiences as "shattering", "a terrible shock", "a real eye-opener". She found lecturers mumbled, refused to repeat what had been said, and even made disparaging remarks, such as "'Mrs. L. makes me so nervous sitting there staring'".

She was unable to participate in group discussions even with the aid of an RNID loop: "It would only work if I could pass the microphone round to whoever was speaking. Yes, I know it would slow things up. But the whole situation made me so nervous I didn't dare ask".... "I was asked if I expected the whole class to revolve around me. There were no concessions. It would be the same for a deaf person at work I imagine. But the difference is I could get up and walk out. I was a free agent. A deaf person at work can't".

Finally, she commented on the lack of sympathetic understanding from lecturers with some surprise that "educated people can still think the way they do".

Not a lady to be defeated lightly, she was obliged to withdraw.

This is illustrative of all the processes of stigma and stereotyping I have been describing to date. Definitions refused to yield either to her expressive communicative competence, or salience of resources. Disclosure of difficulties simply solidified the typecasting of her as incompetent. And the situational nature of deviance defining is again apparent. Contrary to her own work situation, where she retains a fair measure of self-control, she was entirely at the mercy of others' evaluations here. No accommodative moves were made to alleviate the intrinsic difficulties of communicating in other than a one-to-one situation, so that she was deterred from pursuing the few tactics at her disposal. Her awareness of the frustrations of hearing impaired colleagues facing similar situations within the much more circumscribed framework of employment where withdrawal

carries more severe penalties is illuminating. And secondary deviant outcomes were manifest: "My husband had always encouraged me to be confident before. I've lost that now".

For other discreditable respondents, concurrence in the 'inevitability' of exclusion was apparent. Moreover, further deviant outcomes in terms of restrictions on upward mobility were perceived by Mr. L.M. and Mr. C.P. as equally 'inevitable'. The notion of self-fulfilling prophecies is useful in trying to explain this. As in some other contexts, anticipating the labels of others, respondents tended to adjust their own expectations downwards and behave accordingly. In other words, stereotyping was often internalised by respondents in such a way that the impact was self-confirming.

Miss V.G. and Mrs. G.L. apart, attempts to redefine the situation were largely conspicuous by their absence. Rationalisation in the form of relative contentment at his modest success was Mr. C.P.'s only defence against swallowing wholesale other's ascriptions of incompetence: "I would have had a higher position than I've got now ... But management and administration means meetings though. But I've climbed right up to the top as far as the technical side is concerned", he explained.

Meetings, however, played a peripheral, if non-existent, part in the working lives of many respondents, particularly those in unskilled jobs, such as Miss L.S., Mrs. E.I., Mr. S.G. And discredited respondents were totally excluded. Not even lip-service was paid to the notion of participation. Any efforts were usually met with a rebuff. Only Miss R.C. voiced her disquiet at the exclusion. "They don't want to tell me the story. At a meeting in work which lasts two hours, ask afterwards and get five minutes' report".

There was, however, one exception. As with the phones, Mrs. N.F. had patiently negotiated the use of Total Communication at case conferences in order to participate. The master status nature of her handicap was relegated to its rightful place, and she was enabled to utilise her capabilities to the full and participate in decision-making. Her Department prided itself on being "progressive", and it is rare to find an em-

ployer able to supplement speech with manual communication other than in the deaf world itself. Nevertheless, communication incompetence notwithstanding, salience of personal resources has led Mrs. N.F. at least partially to reverse a previously tainted status and, in her work situation, aspire to discreditable status - for the first time in her life.

Mrs. N.F. apart, strategies were restricted, and for discredited respondents totally blocked. Any room for manoeuvre by discreditable respondents was confined to the attempts at positioning described by Mrs. G.L., and occasional requests for 'filling in' by Miss C.G. Either the illusion of participation was maintained and respondents made what use they could of their lipreading skills and hearing aids; or the question of participation simply did not arise. The stigmatised were truly excluded.

As we explore further aspects of life at work for the hearing impaired, the importance of the twin notions of the situational nature of deviance defining and strategy management, and that of degrees of deviantness, are becoming increasingly clear. As anticipated, some areas of employment are more amenable to negotiation and control than others. Phones and meetings represented 'no go' areas. However, this by no means implies a passive acceptance of deviant status, or lack of manoeuvrability in other work areas. I have been at pains to emphasise the innovative and dynamic nature of bargaining tactics to achieve even the most modest redefinitions of one's status. For those badly discredited, the attempts may be barely perceptible, involving only very minor alterations. For a long time, any attempts may be in abeyance, until an eruption indicates a fresh attack on the prevailing stigma ideology. Mrs. N.F., for example, had worked for many years as a draughtswoman, enjoying little status, before embarking on her new career.

There are degrees of role engulfment as noted in the two previous chapters. It varies over time, and with circumstances. Even if apparent at

interview, and common enough generally to characterise respondents' perceptions, role engulfment is rarely total. It is more likely to be partial and episodic. Neither is it likely to prevail over every aspect of the employment situation. And in other life domains, of course, it is infinitely variable. It is the complementary notion of degrees of deviantness which has illuminated the way in which respondents do differentially respond to negative stimuli. The interest lies in assessing how they perceive their options in this very particular 'semi-closed' situation of work.

As far as meetings were concerned, the general absence of any accommodative before or after 'filling-in' - not to mention the use of alternative means of communication - ensured that stereotyping and stigma did, however, exclude the vast majority of respondents from all Communication Groups. It bears out the findings of CRAMMATTE (op.cit) that it is only the active co-operation of fellow-workers, and, implicitly, what accompanies this - a positive evaluation of competence - that meetings for the hearing impaired can be regarded as anything more than a case of 'doing solitary'.

Whilst an inability to share in meetings was not instrumental in job dismissal, and it did not appear to deter applications for particular jobs, it did, however, have an important additional impact on job mobility. And exclusion also contributed to the internalisation of secondary deviant outcomes in the form of reduced self-confidence, isolation; and in varying degrees of internalisation of the equation of hearing loss with impaired intelligence.

4. EXCLUSION FROM ECONOMIC GOALS

Having examined how processing both by work peers and employers are perceived to affect work-related activities, I will conclude this empirical section by looking at the impact of stigma and stereotyping on the denial of access to broader economic goals within the work setting. Exclusion from such work goals represents the extreme end of the sanctioning pro-

cess I wish to consider.

I propose to investigate how the hearing impaired view their employment prospects in terms of the utilisation of their skills and capabilities, promotion prospects, and job fulfillment generally. I have selected these factors as being the most relevant and representative indices of felt and enacted stigma. By an exploration of such economic containment I hope to have traced the whole sequence of stigma reactions, from the moral, socio-psychological response to departures from interactional competence, to the ultimate denial of access to the economic goals which are purportedly accessible to all in our society. It cannot be sufficiently emphasised that it is interaction which is the crux of the whole issue.

(a) Expectations and aspirations versus 'reality': Underemployment

The complex definitional problems surrounding this area have been referred to in the literature (cf. Appendix 1). I have discussed it with respondents under the general rubric of how they perceived their abilities and capacities to be fulfilled in their work.

I suggest that the social processes with which I am concerned - and which are just as pertinent to the extreme end of the stigmatising continuum - are very much more visible when it comes to a consideration of restricted access to economic goals. Deviant outcomes arising from the equation of 'deviant' communication skills with intellectual incapacity and general inability are more readily amenable to investigation.

Discreditable respondents in Groups I and II did not generally consider themselves to be underemployed. Even Mr. B.U., well qualified academically, considered his position as clerical officer part of the economic constraints operating on all graduates, and his deafness irrelevant to the issue.

(i) "Better Jobs go to Hearing People"

There were, however, some significant exceptions. These were largely

confined to respondents who, coincidentally with the onset or deterioration of their hearing capacity, had experienced the impact of negative evaluations of their competence and subsequent occupational drop (Mr. B.S., Mr. L.M., and Mr. S.L.; or respondents such as Miss B.G., who, despite her educational qualifications, perceived her impairment such as to relegate her permanently to an employment status well below her abilities and qualifications).

For these respondents, the master status of hearing impairment appeared to dominate all other definitions of capability, despite proven ability in the case of those with acquired deafness (and proven academic ability in the case of Miss B.G.) Even the retention or acquisition of communication skills seemed to make little impact. Little job restructuring or accommodative moves were made. Once tainted with undesirable differentness, retrospective interpretation tended to take place, categorising respondents as 'this is what you were like all along'. Official processing by statutory placement agencies, as commented in Chapter 4, reinforced definitions of diminished status.

Mr. B.S. had been 'obliged' to take an occupational drop from telecommunications engineer to GPO sorter. He commented: "I'm employed well below my capacity. There's no comparison".

Whilst appreciating that continued work in telecommunications was possibly not feasible, the official labelling process which then evaluated his technical skills as of no further account is characteristic of the routine categorisation at the lowest common denominator of competence often applied to the newly stigmatised.

Similarly, Miss B.G.'s educational accomplishments and communication skills (her prelingual deafness notwithstanding) were insufficient to override the overall definitions of her as a 'faulty person'. She discussed the lack of utilisation of her abilities in a way which is more reminiscent of discredited respondents. Boredom figured prominently. "I'm utterly

bored mentally. Even if I were at the top I couldn't see my brain being stretched. I enjoyed the novelty initially. But once I knew how to do things, it wore off ... I have gained some advantages from the job. Practically I've learnt about that type of catering and dealing with people. I find it frustrating more than actually disliking it. The tedium".

Salience of financial resources did, however, enable Mr. S.L. to deflect some of the more practical ramifications of his downward occupational spiral, although the onslaught on his self-image was in no way alleviated. His occupational drop from pupil barrister to self-employed copy editor could, as he explained, have been modified, at least in terms of status, if not in terms of actual job fulfillment. As he commented: "Now I'm certainly underemployed as far as pay is concerned. I earned less than £600 last year. If I wasn't cushioned against financial difficulties I would be more 'employed'. I could go out and be a conveyancing solicitor possibly, but I would hate it. I'd be given the least problematic jobs if I was drafting contracts. It happened whilst I was still at the Bar. You're less 'useful'".

Living with his family in fairly affluent circumstances in no way cushioned the inroads into his self-esteem which the impact of stigma and stereotyping, to which he felt he had been subject whilst at the Bar, forced upon him in his new role. Moreover, his discreditable status was very much imperilled by the deviant outcome of his severely circumscribed access to hitherto expected economic goals.

These were significant exceptions. However, 7 respondents in Groups I and II had acquired their occupational status prior to the onset of hearing loss, but their communication skills had enabled them to preserve their jobs despite, in some cases, incorporating equally pernicious secondary deviant outcomes in the form of strain, tension, and feelings of inadequacy and anxiety.

For severely adventitiously deafened respondents, such as Mr. N.M., it has already been noted how a positive evaluation of his identity has enabled him to retain a grip on his position, although not without a good deal of strain and additional effort. Additionally, the salience of his resources contrasted sharply with those of the other discreditable adven-

titiously deafened subject in the sample (Mr. S.G.), although as noted earlier, the retention of a positive self-image was found to be increasingly difficult to sustain over time. Not only is stigma not universally applicable; the triggering of stereotypes is similarly not inevitable.

Making reasonably effective use of one's communicative capabilities which - notable exceptions apart - has been broadly characteristic of discredited respondents declined sharply as communication skills increasingly departed from the norm. All the factors which I have discussed in the previous two chapters seemed cumulatively operative in producing this deviant outcome: the prior labelling as incompetent, and one outcome in the form of restricted job opportunities; the insurmountability of 'obstacles' such as the phone and meetings; exclusion from participation in on-going work activities; and, above all, I contend, the constant disruption of social interaction with work peers, which tends to elicit various degrees of stigma reactions.

Apart from Mrs. N.F., and Mrs. S.T. who had capitalised on their impairment and entered professions for the deaf, and Miss H.Q. and Miss G.F., employment for discredited respondents was generally confined to routine, repetitive, semi-skilled and unskilled manual or clerical tasks.

The spiralling nature of the deviance defining process was illustrated by Mr. H.H.: "I've worked myself downwards instead of up. I'm only using part of the training I've done - technical drawing, industrial experience .. I'm trying to search for a way up. This is just semi-skilled work".

Prelingually partially deaf, his ambivalence, oscillating between intense resentment and distrust of 'hearers' and the imposition of hearing norms, and fascination with the world of hearing people, reveals most vividly the dynamic nature of strategy management which is characteristic of someone of his marginal status and communicative competence.

His letter to me gave some indication of the significance struggling with the "near monopoly" (HIGGINS and NASH, 1982) of the hearing world

held for him: "I think it's searching for something in me is very capable but not yet come out .. that I can show hearing people that I can do outstanding work if given the chance to discover it".

It is effort plus which is necessary for the stigmatised to gain even partial acceptance. He readily concurs that his present post as wireman assembler hardly does justice to his pursuit of an Open University degree and the acquisition of $1\frac{1}{2}$ credits to date.

(ii) Boredom and frustration

Although intimately connected with the rather more elusive question of job satisfaction, the feeling of boredom, already expressed by Miss B.G., together with a profound and dispirited sense of resignation with their deviant employment status was fairly characteristic of discredited respondents. Varying degrees of (superficial) concurrence in the verdict - both the outcome and its implications for self-esteem - were expressed at interview by Group IV and V respondents. Boredom was mentioned repeatedly, suggesting that underutilisation of capability was widespread.

Mr. E.B. at first interview, illustrated this common refrain: "The job doesn't occupy my mind. As a skill I can use the typewriter. But I'm bored .. I would have been in publishing or writing .. There isn't the means to eradicate the frustration in employment if you're deaf" -

additionally bearing out my general contention of the perceived limitations for manoeuvre in a framework such as work. And Miss M.A., echoing the refrain, commented revealingly "I miss having brain work. Want to learn typing. TOPS course did not accept. Fought hard but failed. I had too many ambitions" (my italics.)

Only Mr. G.C., it will be recalled from Chapter 4, after many years of apparent acquiescence was now attempting a bold confrontation strategy. "Bored. Stuck at x. Routine. Want to be social worker for deaf", he signed. The result of his application to Goldsmith's was unfortunately not known. However, his fresh attack on the prevailing stigma ideology about 'the deaf' after years of apparent capitulation does, once again, illustrate the dangers of regarding deviant outcomes as static.

The interest lies in viewing these movements - big and small - within

the circumscribed framework of employment, where definitions favourable to self are much less readily sustainable on their own terms. However, even within this semi-closed situation, as we have seen, there are some areas which are more amenable to redefinitions than others.

Collectively, discredited respondents' perceptions of their prospects indicated a sense of impotence and frustration. Varying degrees of role engulfment were seen as constituting their 'reality' - as illustrated by Mr. D.S. and his parents: "D. has the capacity to do much better. He's very competent mechanically. Expert in many things. Does his own car repairs".

(Indeed my audiometric equipment had a temporary 'hiccup' at one of the interviews. The problem was resolved with speed and ease by D.) His father continued: "He's bored. He's not using his full capabilities ... As soon as you step out of line and try to improve his chances, there's nothing".

Or, in a word, "When you're deaf you take any job" (Mrs. S.T.)

The absence of active politicization as a strategy with which to combat underemployment possibly bears out not only the pervasiveness with which stereotypes surrounding hearing impairment tend to be at least partially internalised. Definitions also permeate the macro level. Despite labelling critics who cavil at the apparent neglect of the perspective to address itself to the wider power dimension, I contend that labelling at the more informal micro level of interaction is easily translated into power differentials at the wider level. And underemployment, as Joan MONTGOMERY (1978) has argued, is politically more 'acceptable' than unemployment.

Thus, differences in outcome generally correlated with respondents' status as discreditable or discredited, and my ranking according to the "Ease of Communication with .." scale. Generally in Communication Groups I and II, communicative competence had either not deteriorated, or, for those prelingually impaired, had been adequately acquired, so that retention of jobs held was not seriously jeopardised, and underutilisation of

of skills tended not to be perceived as a problem. There have been some significant exceptions, however, sufficient to indicate some limited commonality of experience of underemployment as a deviant outcome. Stereotyping has affected some respondents in terms of exclusion from access to legitimate economic goals across the whole hearing impaired spectrum.

For the discredited hearing impaired, it may be viewed as trebly penalizing. It is illustrative of the spiralling nature of the deviance defining process. Categorised as incapable of doing anything better, their deviant communication skills tend to be self-confirming. Deficiencies in expected communicative competence preclude an effective stake in the bargaining process for more favourable definitions of self. And further deviantising is highly likely. Being underemployed once enhances the likelihood of being underemployed again, ensuring a disproportionately less positive evaluation of capabilities in the future.

(b) A Step up the Ladder. The Unassailable Peak?

As a deviant outcome, partial or total denial of access to promotion is the other key area where the negative categorisation of the abilities and intelligence of the hearing impaired is most overtly manifest. Together with phone management, it is an area where the equation of hearing loss with diminished mental functioning is more resistant to attempts by the stigmatised at redefinition than almost any other. Only a very few respondents whose communication skills were sufficiently intact to make passing at work feasible managed to scale this hurdle.

Promotion* is held to involve executive, administrative and supervisory duties where a premium is placed on communication skills - particularly of a more formal, stylised kind, in conducting meetings, making outside

business contacts, and facilitating interpersonal relationships both within

* I am defining promotion to include both any upward occupational mobility, even though it does not necessarily involve promotion to managerial, executive level, within the same organisation, and promotion to a higher level involving a move to another organisation. Any horizontal mobility is difficult to assess in terms of its status rating, but where it occurred, and was perceived as significant by respondents, mention is made of it.

and outside the organisation. For discredited respondents in Groups IV and V, promotion was generally perceived as being not even remotely feasible. It was sometimes almost offensive to ask at interview.

However, in respect of this deviant outcome, not even communicative competence could necessarily counteract the force of pre-existing stereotypes. The master-status trait of hearing impairment tended to be all-powerful. The barriers this erected are described by Mr. B.T. (I): "You haven't got a snowball's chance in hell. Your only chance is with a skill you might make something. For administrative positions, they say 'You've got a communication difficulty', or 'He's a bit hard of hearing. We'll have to think about that'. Then if they find someone equal to you but hearing, he'd get promotion in preference to you".

The hearing impaired, as a broad group, are evidently not considered sufficiently capable either of filling executive posts or of coping with the communication demands which such posts require. The latter legitimates the former. As noted in other contexts, the decision is often preempted. And little or nothing appeared to be offered to respondents by way of remediation. It was evidently considered 'not worth it'.

Yet the evidence from the States, as discussed in the literature, suggests that it is sound economics to employ secretaries to deal with the phone and interpret for deaf executives (SMITH, 1979); and to employ interpreters, even on a short-term basis, to facilitate on-the-job orientation and performance at a level commensurate with abilities and qualifications. Again we are confronted with the familiar pattern of legitimating denial of access to economic goals by reference to what are erroneously termed 'the inherent limitations of the handicap'.

There is nothing startlingly new about the evidence of aborted promotion prospects for the discredited deaf. My findings certainly support the conclusions of SCHEIN (1975) that for the profoundly prelingually deaf (I would add, who are defined as communicatively incompetent), "...other problems may be demeaning, annoying and ultimately overcome; promotion, especially to managerial positions, may be beyond /their/ immediate reach".

However, what has been less well documented is the extent to which

this applies to all hearing impaired people as a deviant outcome. My findings - as indicated by Mr. B.T.'s perceptions of the situation - suggest that respondents from all Communication Groups in this set of sub-samples certainly felt it to be so.

As a perceived 'obstacle' to any possibility of advancement, it was a recurrent theme. 24 respondents (11 from Group I, 3 from II, 1 from III, 4 from IV and 5 from Group V) commented on it. Their felt capacity to surmount the 'obstacle', according to communicative performance and salience of resources varied so marginally that promotion, like phone management, appears to be an area where respondents' experiences and perceptions of denial of access were similar both in degree as well as kind.

(i) Denial, avoiding the issue - and paralysis

Of the few discreditable respondents who made any headway at all, only Mrs. A.B. (I) had made any significant advance. With the other respondents in this small group, she had recourse to rationalisation and denial to neutralise the actual or potential onslaught on self-esteem which acceptance of available definitions relating to the promotion prospects of the hearing impaired would otherwise have entailed. As she commented: "There was one other candidate for the Organiser's post. A hearing person. Hearing loss is irrelevant for promotion".

Salience of resources, or as she put it "experience, personality and educational qualifications"

were seen to be of much greater significance.

Mr. B.U., with not dissimilar educational qualifications, also optimistically assessed his prospects, equally regarding an all-round performance as more relevant than hearing loss. As with EDGERTON's (op.cit) retardates, it is too much to have to accept that one's basic identity has been redefined in much less acceptable terms, if any trace of self-esteem is to remain. He commented: "I don't think I'd be denied the higher echelons of the ladder. Promotion is on merit. It's difficult to say whether phone errors would count against you. There are many other areas of assessment .. I've never wanted to do anything yet from which I've been barred because of hearing loss".

As noted earlier, Mr. C.P.'s ceiling had been defined for him, modest success permitting some rationalisation of imputations of stigma. For Mr. P.E. and Mrs. B.C., their upward mobility was of a very peripheral nature and hardly constitutes promotion within the terms set.

It is important to bear in mind that other factors extrinsic to hearing loss and its perceived evaluation were, nonetheless, appreciated by some respondents as constituting additional 'realistic' deterrents to promotion - thereby conceivably relieving subjects from the necessity of confronting the more painful stereotyping and stigma of their impairment.

Miss P.L., for example, commented "There's nowhere to be promoted to. It's difficult to get up from a secretarial job anyway. It's nothing to do with being deaf".

An equally frank assessment of the obstacles imposed by age and lack of educational qualifications came from Mrs. G.L. and Mr. P.E. The latter briefly commented: "It's a question of age as much as hearing loss. And lack of qualifications. They always seem to promote the younger ones... Even if I went to evening classes now I wouldn't be promoted because of age".

These examples apart, the depressing effect on ambition and culturally approved drive for advancement of imputations of mental incompetence and incapability were readily apparent. For some discreditable respondents, they manifested themselves in feelings of unease, even dread, and were handled generally by recourse to expedient withdrawal and avoidance of the situation altogether. Mr. B.S. and Mrs. C.O. described how they felt about the anticipation of rejection and rebuffs.

Mr. B.S., for instance, had been highly ambitious prior to the deterioration in his hearing and concomitant occupational drop. Now he commented: "I've had promotion within the GPO to a higher grade. But I've held back to an extent. I want more responsibility, but as a supervisor I feel I'd become uneasy".

Lack of self-confidence merged into what amounted to real terror at the contemplation of even horizontal mobility for Mrs. C.O. She said: "I've been with this section 2 years now. I know they've got to

move you on .. I've been putting it off. I dread it".

Yet prior to the quite severe deterioration in her hearing, she, too, had been ambitious. Now she appears to have concurred in the evaluations of others that she has reached her ceiling, although commenting somewhat wistfully: "I would have liked more responsibility. I'm disappointed. You can't compete with a person who's got full hearing. You can do all sorts of things to get over it, but you can't compete. Any executive position is out".

Feelings of intense frustration accompanied the comments of several discreditable respondents. Stigma was perceived to operate as strongly as in that other key area of exclusion mentioned: phone management. The latter is, of course, inextricably interwoven with the whole issue of promotion, negative evaluations in respect of one reinforcing similar evaluations in regard to the other.

Miss B.G.'s comments are indicative of the feelings to which exclusion give rise. And the sequential nature of the deviance defining process, even for a respondent of her communicative competence and educational qualifications, is apparent to her in her pessimistic evaluation of her future career prospects: "If I moved up one stage I would have to use the phone. It's all right at this stage. But there's always information coming in on the phone. I can't move on to the next stage. Yet I'm trained in Management ... I had an appraisal and I was told I was not up for promotion. Though they were very pleased about my work, the restaurant manageress just said 'no' about promotion. No reasons were given".

And exclusion from meetings were perceived by Mr. L.M. as an 'obvious' deterrent to any chance of promotion. The absence of any remediation on the part of employers and colleagues has already been mentioned. I have argued how this in itself is strongly suggestive of the very processes which form the basis of this thesis. Yet Mr. L.M. acquiesced in the situation, treating it as "realistic" and "inevitable", thereby providing very convenient legitimation of denial of access to the success ladder.

As he remarked: "Anything in an administrative capacity is realistically denied me. I was offered promotion to accounts manager, but it entailed meetings again. I'd be expected to take minutes. It simply isn't realistic".

His concurrence with others' definitions have, in effect, virtually ensured that remediation will not be forthcoming.

Thus, discreditable respondents, for whom the option of promotion might at least have been considered feasible, generally suffered from the common classification of the hearing impaired as intellectually incompetent and occupationally inept in a manner reminiscent of their discredited colleagues. The pervasiveness of stereotyping and its ramifications in terms of exclusion, or anticipated exclusion, from access to the 'success motif' will be seen to cut across all Communication Groups. Denial of access to the economic hierarchy was no respecter of abilities (Mrs. A.B. excepted). And the extent to which such negative evaluations appeared to be internalised is highly salient. Negotiating and bargaining tactics were minimal and attempts to redefine status confined to a small minority of respondents. As far as this area of employment was concerned both self-concepts and the behaviour of respondents became increasingly committed to a deviant role.

Feelings of enacted stigma, of actually being exploited, were voiced by two respondents from Communication Group III. I suggest this reflects the marginal position both these subjects occupied, uncomfortably straddling both deaf and hearing worlds, secure in neither, and continually weaving in and out of discreditable/discredited status. It also vividly illustrates the tension involved in striving for hearing norms and goals, whilst simultaneously being poorly equipped, communicatively, to realise them, given the assumption that speech and hearing are the only appropriate means of participating in, and experiencing the world. Both Mr. H.H. and Mr. F.J. had tried for promotion and been rejected. Both now felt they were actively discriminated against in their quest for a grip on the elusive ladder to success. Mr. H.H., for example, commented:
"You're limited. They don't give you responsible jobs. They give you arduous, menial, dirty, filthy jobs".

(ii) "You never get promotion because you're deaf"

Hearing employers' emphasis on communication deficiencies, although seen as successfully frustrating attempts at upward mobility by discredited respondents, was generally perceived as an absolute deterrent by discredited subjects. This applied both across jobs, and within the current occupational hierarchy. Cultural stereotypes concerning 'deviant' speech performance, minimal intelligence, leading to permanent location in low-grade jobs engulfed many respondents.

Mr. E.B., for instance commented: "I've been in this job 7 years and no way can I get any further. I don't expect to be promoted because I'm deaf. For those who don't speak plainly it's a case of 'Oh no, he's no good'. It's also a vicious circle. I stay at the bottom because I know the pressures of trying to move up. I can't bear failure. So I remain where I am".

There can be no more eloquent testimony to the internalisation of negative evaluations of his (undoubted literary) competence, and acquiescence in deviant status which departures from expected communication skills elicit. And yet, as noted earlier, his evaluation of his prospects underwent a quite dramatic change with his appointment as voluntary organiser at the local Breakthrough Club.

I return again to the question of coping strategies in a situation which, on the face of it, allows little room for manoeuvre - somewhat reminiscent of the situation one might expect to find in a total institution. The only feasible adaptation to exclusion from this particular economic goal for most respondents was acquiescence. However, as argued, total commitment to a deviant role is rarely more than episodic, even though at the time of interview(s), it reflected the way many discredited respondents felt about this particular aspect of their employment lives.

As commented earlier, acquiescence is far from indicative of apathy. It is only with the advent of apathy that role engulfment becomes a way of life. SCHUR (1979) comments: "People succumb to stigma when and to the extent that their active efforts to confront it fail. They succumb to the extent they are unable or unwilling to make such efforts" (my italics).

This was not the case with discredited respondents here, even after re-

Consider the attempt of Mr. D.S.'s father to improve his son's employment position. Frustration and resignation by no means indicate a solidified outcome for all time. However, at both interviews, his prospects were perceived to be totally restricted. D's father commented: "The question of promotion doesn't really arise. There's no chance. It saddens him a little" (D. concurred).

The whole family then went on to express intense frustration: "I know he can do more, but he can't prove it until they give him the chance. A hearing person can lay their own case on the line".

Miss M.A. talked about her own experiences as well as those of her wide circle of signing deaf friends. Again, capitulation in others' definitions appeared complete. Promotion, or the possibility of even modest advancement, were not regarded as even remotely feasible. Articulated by signing respondents, it represents a striking departure from their more robust repudiation of ascriptions of incompetence in social situations, and the formation of a counter stigma ideology with which to protect themselves from the hearing world.

As with other respondents, the nature of Miss M.A.'s present employment precluded any possibility of advancement. Being trapped in low-status jobs is itself a deviant outcome characteristic of stigmatised groups.

As she signed "Nowhere to go. Not possible in present job".

Her previous attempts at 'betterment' had been frustrated, as she perceived it, by communication difficulties. Referring to her previous job as a punch-card operator, she signed: "Wanted to be a verifier. Machines change. Key-board punching. No clear explanation as to what expected to do. So passed over".

The social control inherent in abbreviated instructions - or instructions by omission - commented on earlier, and the implicit lack of trouble taken at this critical juncture, have resulted in a predictable deviant outcome.

Her response cannot be characterised in terms of the smouldering resentment of some respondents. Neither can it be regarded as apathy. Her apparent acquiescence masked a genuine sense of frustration, which was tempered only by recourse to fantasy - a dream world where "one day, things better for deaf".

Generally she commented of her deaf colleagues: "Promotion impossible for deaf because of communication. Perhaps 2 in 100 get promoted. Need very strong will. Depends on strength of character. Need good speech. Know one or two promoted deaf. But very unusual".

This represented a quite unusual tacit awareness of the salience of emotional and social power resources, communication skills apart, but the wider implications in terms of political strategy - a collective confrontation with the hearing world of work equipped with a counter stigma ideology - were not formulated.

That redefinition of the situation did in fact take place in a tiny minority of cases amongst discredited respondents attests to the on-going struggle to manipulate even modest changes in self-image. As importantly, it demonstrates that even this 'obstacle' - one which has been accepted as virtually 'inevitable' by so many employers and hearing impaired people themselves for so long, can be surmounted. It must at least raise questions as to the apparent incapability of the deaf successfully to achieve promotion.

Mrs. N.F. and Mrs. S.T. had both successfully capitalised on their deviant status, Mrs. N.F. moving from draughtswoman to assistant social worker, and Mrs. S.T. from canteen assistant/machinist to part-time sign language tutor. And Miss H.Q.'s upward mobility from accountant's assistant to senior computer tester and solderer indicates, I suggest, the effects of the more favourable evaluation of deaf peoples' capabilities in the States. And Miss G.F. had achieved co-directorship of her company.

However, these were exceptions. Movement was either minimal, or in Mr. M.C.'s case so painfully slow as to be barely perceptible, and then only to a ceiling rigidly defined by others. As with discreditable respondents, recourse was had to rationalisation in an effort to prevent imputations of stigma from ravaging his self-esteem. His constant references to his position as "accountant" and "professional status" doubtless helped to leaven the impact of blocked progress to further promotion.

As he remarked: "I got promotion. I moved from clerk to accountant in 19 years. But very slow. There's very little chance of anything more ... I had a letter appreciating my good performance. That's as far as it goes".

Exclusion from advancement up the career ladder illustrates a point raised by Mr. D.S., which could otherwise be overlooked: the 'push' and 'drive' necessary to sell oneself in modern industry is critically dependent on the 'right' kind of expertise in communication. Those adjudged to be deficient, or worse, deviant in this respect, are thus heavily penalised at this level. Smoothness of interpersonal skills additionally involves an appreciation of the kind of visual, non-verbal cues which the hearing impaired have difficulty in picking up - and which can themselves jeopardise an encounter. The right touch, a word in someone's ear at the right time, and an ear alert to what is going on are all prime requisites for ascending the success ladder. The extent to which the hearing impaired are excluded from this vital input has already been discussed.

The sequential nature of deviance defining can thus readily be appreciated by a discussion of deviant outcomes, such as blocked promotion prospects (without in any way implying any inexorability to the process). The whole sequence from initial disrupted interaction, to stereotyping, stigma reactions, denial of access to work-related activities, and ultimately denial of access to economic goals is readily discernible.

It is salutary that at the level of promotion outcomes, where it was anticipated differences in communicative competence would lead to differential strategy management and subsequent differences in outcome, did not, on the whole, materialise. Respondents experiencing difficulties in Communication Groups I and II seemed to suffer many of the same problems, albeit in slightly attenuated form, as those in Groups IV and V. Both discreditable and discredited respondents found any potential abilities negatively evaluated, the focus being firmly located on the master status phenomenon of their impairment.

This gives added support to my contention that employers do 'conflate' the hearing impaired and treat as similar those with vastly different capabilities and capacities, at the level of exclusion from access to economic goals which are culturally valued. 'Spillage' occurs. What is significant is that neither communicative competence nor salience of resources appeared to make the kind of difference to promotion outcomes which they appeared to have in other aspects of employment.

The enormous power wielded by those in a position to define and categorise to block the progress of those designated as shameful cannot be underestimated. Promotion, together with exclusion from the handling of phones, have emerged as the two key areas in employment where control is firmly in the hands of the definers. Whilst it is reminiscent of the constraints exercised by official labellers discussed in Chapter 4, the framework within which this particular stigma contest occurs precludes even the limited bargaining available to the definers manipulating definitions on the outside . The definitions of hearing colleagues and employers on the inside cannot be sidestepped here. Only the most minor face-saving devices, generally of a private nature and not for public display, could alleviate the impact of wholesale redefining as being 'economically undesirable'.

5. THE SIGNIFICANCE OF WORK FOR THE HEARING IMPAIRED: MAKING THE MOST OF A BAD JOB

Finally, I will endeavour to consider the meanings that work has for the hearing impaired respondents I talked with under the very general rubric of job satisfaction , or job fulfillment. I am, however, more concerned to try and tap general perceptions about the whole work experience. Rather than trying to isolate, other than incidentally, which factors tend to act as 'satisfiers' and 'dis-satisfiers', I have tried to tackle the question broadly in terms of the significance that contending with a dominant hearing work world holds for the hearing impaired. The continuum

from 'Like your job very much' to 'Dislike it' merely provides an entree to the subject. As WILENSKY (1967) has indicated, direct questioning regarding job satisfaction tends to "...discourage admission of discontent .. a man may feel he is admitting that he is spineless or a failure if he pictures himself as staying in a job that violates his most positive self".

To an extent WILENSKY's contention was borne out here. Even where other evidence from respondents indicated that the job situation was problematic, of those who commented only 4 respondents, Miss B.G. (I), Mr. H. H. (III), Mr. E.B. (IV, and Mr. D.S. (V) openly conceded they disliked their jobs. Eleven respondents opted for the less contentious position of 'Quite liking their job' (5 in Group I, 3 in II, 1 in IV and 2 in Group V); and 7 said 'Just OK' (2 in Group I, 1 in II, 1 in III and 3 in Group V). Seventeen respondents, 14 from Group I, said they liked their job 'very much'. The 2 discredited respondents who also applied affirmatively, Mrs. N. F. and Miss H.Q., have already been discussed elsewhere as being thoroughly atypical.

The only other discredited respondent, Mrs. B.L. (IV) to respond affirmatively had effectively withdrawn from the unequal struggle of trying to maintain favourable definitions of self against a fairly consistent work background of onslaughts on her self-esteem, as she recalled them at interview. Her communication skills were defined so negatively, and her work capabilities so undervalued, that she now worked as a part-time masseuse in private practice for her husband. Relief from active engagement in on-going stigma contests was illustrated by her simple comment: "It's lovely".

Of the 14 respondents liking their job very much from Group I, some had achieved their occupational status prior to the onset of hearing loss (Mr. S.W., Mr. A.E., Miss A.S., for example); others (Mr. C.P., Miss P.L., and particularly Mrs. A.B.) had achieved a level of fulfillment despite their hearing impairment. Communicative competence, and with it, the ability successfully to deflect potential ascriptions of deviance

were evidently highly salient in their attainment and retention of what they perceived as satisfactory occupational status.

It is pertinent to ask what this contentment actually meant to respondents. Miss V.G., for example, described what she felt to be a genuine level of fulfillment as follows: "Helping young children to achieve their potential, and the joy of working with young minds that aren't prejudiced has given me a sense of purpose. I find it immensely enriching. I wouldn't want to become Head or join the Inspectorate".

However, as BIRD and TREVAINS (op.cit) and TREVAINS (op.cit) have found, expressed levels of contentment could often mask other perceptions which indicated an undercurrent of quite different meanings. For both discreditable and discredited respondents, these often took the form of lowered expectations of job fulfillment masquerading as satisfaction; relief at obtaining employment at all, whatever the level; the suppression of one-time ambitions, hopes and aspirations (by no means uncommon to the normally hearing); feelings of job insecurity, boredom, pointlessness, and, significantly, an undercurrent of profound restlessness.

Thus the significance of either 'liking' or 'disliking' one's job tended to give way to a range of other understandings of the work situation, in response to the now familiar cluster of devaluative labels. These reflect more faithfully, I suggest, the perceptions both discreditable and discredited respondents held of their employment.

(i) Pipe-dreams

The equation of hearing loss with reduced mental capacity and abilities and - insidiously - the hearing assumption that so long as the hearing impaired are employed amongst their 'own kind', hearing values are not threatened, served as a deterrent to even the most active and vocal of discreditable spokespersons.

Mrs. L.L., with her hard-won position as lipreading tutor, achieved after the onset of severe clinical deafness commented: "The actual job

itself is an important source of satisfaction. But I'd like to see things done. There are things I could do, to see that more things are known about the deaf. I'd like to promote a greater degree of knowledge about deafness. The ignorance is appalling .. Whether I'll get the opportunity .. ".

As a severely impaired respondent, her ability to campaign for the deaf demands credibility and, above all, acceptance from the hearing world. It is precisely that acceptance from which many potentially stigmatised victims are excluded (witness her withdrawal from a teaching course which could have given her such an entrée). Mrs. L.L.'s communicative skills and salience of personality resources have enabled her to penetrate only to some extent that acceptance barrier. Her attempts, at the time of writing, to set up classes to disseminate such knowledge have, to the best of my knowledge, not materialised.

(ii) "You're lucky to have a job at all"

The very fact of being in employment at all was rationalised by some discreditable respondents as an accomplishment, even though the level of the job was in three cases probably well below capacity. The work ethic was still powerful. 'Significant living without work' was not perceived in any way as a viable alternative. If expectations are low, perceived satisfaction is likely to be correspondingly higher - an insidious outcome of the labelling process. Yet the assault on self-esteem which such a negative evaluation of capabilities elicited could not be totally neutralised, even by the communicatively competent Mr. C.R. As he remarked "The only satisfaction the present job gives me is that when I come home at night I know I've done an honest day's work. Earned my corn, so to speak".

(iii) Being trapped - and a nagging sense of uncertainty

The master status of hearing impairment and its 'spillage' effects encompassing all hearing impaired people, regardless of proven ability, had affected Mr. B.U. in terms of frustration at the constraining nature of his job, as well as the lack of opportunity to exercise initiative and responsibility, for a person of his intellectual ability. And Mr. N.M.,

despite his success in retaining a grip on his managerial position has already commented on a sense of frustration and the insidious dwindling of self-confidence at the difficulties entailed in sustaining his vigorous staff education programme. The momentum appeared to flag over time, as he added at corroboration interview: "I don't say I get ignored purposely. But because I can't hear what they say, I've lost confidence over the certainty of my position. I used to know when I was right. Now I have to give hearing people the benefit of the doubt".

This has quite serious secondary deviant outcomes in terms of feelings of anxiety and inadequacy, although he makes concerted efforts to conceal these and normalise his working environment.

(iv) Insecurity

Feelings of insecurity, either financial or job-related, were common amongst all respondents. For Mr. S.L., ascriptions of incompetence in his previous job, and concomitant pressures to quit, were keenly internalised. The accompanying onslaught on his self-esteem has critically affected the way he evaluated his present position and prospects. This may well in turn determine his future economic role in terms of a progressive narrowing of options. Outcomes, therefore, operate at both socio-psychological and practical levels.

Mr. S.L. commented: "Others esteem me less because of my work. Friends I used to have don't come any more .. The question of the long-term future of deaf employees concerns me. The first task is to convince them you can do the job; and the second is that you've got a future. At the moment there's no future. Even the medium-term future is doubtful. With the recession in the publishing industry, I was effectively unemployed last year".

A not dissimilar insecurity, coupled with a diffuse hankering after goals which he was barely able to articulate, but from which he 'knew' his deviant communication skills would debar him, affected Mr. H.H. In the letter he later wrote to me, his comments have a particular poignancy. They indicate vividly the oppressive nature with which social control is perceived to be wielded by the dominant hearing majority, stifling creativity and initiative, and producing a sense of continuous uncertainty and insecurity.

"This firm I'm working for .. the job so far seems secure in so far as things go well, but any signs of difficulty seems to disrupt .. I have worked very hard trying my best but I feel I am running myself down ... I have developed an inner distrust of hearing people probably because of job insecurity .. I am much more interested in nature, a satisfaction that it is helping the community in some way .. To give you an example, I have been a keen aquarist and did numerous experiments designed to understand ecology and husbandry. I literally worked several times all the night. In other words, when my heart and soul is in such rewarding work, and write short articles to a magazine read by thousands of hearing people it is a great feeling of satisfaction".

His comments also illustrate the extra effort which is required to prove oneself on an equal footing with hearing people. This is something which has been mentioned particularly in connection with discreditable victims, but to an extent spills over into the lives of the evidently communicatively deviant. A double standard also operates here. The fact that very many hearing people are less able, and, paradoxically, their language in many ways more impoverished than that of many of my hearing impaired respondents is very conveniently obscured and mystified.

Mr. H.H., for example, remarked to me with some astonishment at corroboration interview: "Hearing use 'f-' as an adjective! I never heard swear words before I came into the hearing world".

His own reverence and striving for mastery of that elusive goal, language, are an ironic commentary on the many abuses to which such language is often subjected by the dominant hearing majority.

The importance of security to the hearing impaired, sometimes at the expense of other occupational goals, is often tightly engrained into the lives of discredited respondents. The quest for pattern, order and predictability have been brilliantly and poignantly described in WEST's (1969) book for his deaf daughter, to explain "...your deep sense of precariousness in a world of near silence".

Unfortunately, it is a pattern which is often reinforced to the detriment of much-needed training in flexibility in segregated, residential schools for the deaf, where socialisation is still often geared towards the avoidance of the unpredictable.

Terror of change nevertheless brushes off on to those who acquire

their hearing loss later on in life. The implications, both in terms of deviant outcomes, such as occupational docility and immobility, a reluctance to face the implications of technological change, and the internalisation of expectations which preclude the possibility of personal growth and change through the constructive confrontation of the unpredictable, is an integral part of the labelling process. It masquerades as protectiveness . Its effects are to exclude.

Two contrasting responses illustrate how the significance of security is differentially perceived by 2 Communication Group IV respondents, one educated at a special school for the deaf, and the other with normal schooling.

Mr. M.C.: "I come home with a sense of satisfaction with my job. It's secure. It's important for a deaf person to stay with the same firm to give time to establish communication and cement relationships. If a deaf person continually changes jobs it never helps. I've known deaf people who've moved around from job to job and now -- nothing. Permanence is more important than anything else".

Mr. E.B., on the other hand, was one of the 4 respondents to be directly outspoken in his dislike of his job. At first interview, his frustration at his attempts to change jobs has been mentioned earlier. With a respectable 7 years' service in his present company, he remarked: "In the deaf world when I suggest change people get terrified. People say you must be grateful for the job you've got. The social worker is concerned about my social life. I can't convince her I want to do something about my work. Whenever I go and talk to her about work, as talk I must, she shifts the topic on to my social life".

The controlling definitions of official labellers have been discussed in Chapter 4, particularly those of the so-called 'helping' professions. As has been noted, this particular unequal stigma contest has been partly resolved by Mr. E.B.'s appointment as voluntary organiser to the Break-through Club. The contrast between his dynamic and assertive struggle for re-definition of self-hood and the acquiescence of Mr. M.C. could not be more marked. However, as discussed the appearance of stoical resignation is a deceptive one. A dynamic view of strategy management is essential to a proper understanding of the reciprocal nature of deviance

defining.

It is interesting how Mr. M.C. regards his deaf colleagues who are 'job-hoppers' as deviant, tarnishing the image of the deaf generally. It is also a protective device to try and solidify an image of in-groupness from which, as a signing rejector of the deaf community, he has excluded himself. Preserving even a precarious perch in the stigma pecking order by defining others as more deviant represents Mr. M.C.'s main attempt at stigma neutralisation. It is similar to the contempt in which deaf peddlars are held (HIGGINS, 1980).

Mr. E.B., although still discredited in casual social encounters, and within his paid work situation, has managed to manipulate definitions within the particular context of the local Club. Both the situational nature of deviance defining, and the reversibility of outcomes are important here. Imbued with a new self-confidence, it is conceivable that experience and mastery of a position in a voluntary capacity may lead to a redefinition of his paid work capabilities. Although, as many labelling theorists have shown, it is difficult to reverse labels, once stigmatised, it is by no means impossible.

(v) Indifference - except to a pay packet

For those whose communication skills were evaluated as totally deviant, responses tended to reflect an utter weariness with the whole business of work. The concept of 'job satisfaction', as a culturally desirable goal, elicited little response. Phrases such as that of Mrs. P.K.'s mother of her daughter: "Just don't care. It's a job"; or "I'm just waiting for my retirement" (Miss A.L.) were fairly typical.

If any factor at all was stressed, it was that of pay, something that has hardly been mentioned to date as of much significance, beyond the occasional grouse. It seemed to be the one readily identifiable variable for many Group V respondents, especially for the profoundly orally deaf,

additionally functionally illiterate. Mr. M.R.'s mother, for instance, commented : "All M's interested in is money".

Pay is rarely considered by writers on work satisfaction to rate very highly (MORSE, 1969; JAHODA, op.cit). But for those with little else at stake, and for whom the other functions of work have little relevance, it is perhaps not surprising that it should be seen as the only factor holding any meaning for them.

(vi) Itchy Feet

Beneath the apparent resignation, however, an underlying sense of restlessness was evident (contrary, again, to the arguments of COWEN and BOBROVE (op.cit) that severely impaired subjects tend to be better adapted to their lot than the more mildly impaired.) It was manifested both in an expressed desire for change - which characterised respondents' perceptions from all Communication Groups, and in the constant references to the boredom of some subjects' jobs (also mentioned in the section on underemployment). The tedium felt by Miss B.G. (I) in her capacity as cook/waitress will be recalled, and this tended to be a refrain echoed by respondents from Groups IV and V. 6 respondents (1 from Group III, 1 from IV and 4 from Group V) made very specific and pointed mention of it. Miss R.C., for example: "Bored. Routine. Same thing".

The evident boredom and tedium arising from doing a job well below one's perceived capacity, combined with a restless, but generally unsatisfied urge for change, were simultaneously profoundly disquieting, and yet the most positive indication to date that role engulfment is rarely total. These, I suggest, are just the ingredients for movement, and potential political and social change. It is from such shifting definitions of parties to stigma contests that social change may eventually occur at the micro level. However, anything approaching the politicization strategies adopted by the signing deaf in the States are still a far cry from the

meanings discredited respondents had of their employment situation at the time of writing, and the strategies they employed to combat stigma. Miss M.A. commented: "Content. But not the great job. Need to keep present job. Must because it is so difficult to get a job today. But not for ever and ever".

Given her lack of salient resources, any movement is likely to be small.
enough

But I am sanguine/to expect some movement, however ostensibly 'insignificant'.

Only Miss G.F. in this Group had the personal and financial resources to be able to attach any significance to the notion of job fulfillment, despite being defined as grossly communicatively deviant in her social contacts with the hearing world. Her already elevated job status compared to that of other respondents in this Group (dearly fought for) enabled her to have a certain leverage denied her colleagues. She commented: "My heart's not in advertising though it gives me the chance to do other things, like making films".

She plans to establish a Workshop for the Deaf. Her chances of success will, I suggest, revolve around the kind of credibility and 'courtesy' acceptance she is able to negotiate with the hearing world. It may be that the master status of hearing impairment may ultimately give way to other definitions, such is the reciprocal nature of stigma contests and strategy management.

I have scarcely addressed myself to the more traditional question of whether the hearing impaired, as a group, tend to be more or less satisfied with their jobs, and what factors tend to be rated as 'satisfiers' as opposed to 'dissatisfiers'. Nevertheless, I contend that the use of the very general notion of job fulfillment - or rather the lack of it - has enabled me to bring together much more productively many of the issues which have been raised, explicitly and implicitly, throughout this and previous chapters. I have, in this final section, most deliberately elected to concentrate on what respondents feel about their work life generally, and what their common-sense understandings are of what must appear to be an orchestrated campaign to deny them access to the kind of economic goals which

are held to be socially desirable in our society.

Feelings of stifling of ambition, initiative and creativity, a sense of inadequacy and lack of self-confidence, job insecurity, frustration, and a feeling of pointlessness are common to many of the hearing impaired respondents I talked with, both discreditable and discredited. They are not so dissimilar in nature to the perceptions described arising out of the less tangible stigma reactions which emerge in informal interaction with work colleagues which I discussed in Chapter 5.

Thus, a discussion of my empirical findings has, almost unintentionally come full circle. I was at pains to stress the fact that the process of stigma and stereotyping of those held to be 'undesirably different' has small beginnings. I hope I have shown throughout these three chapters how such beginnings are also in the habit of mushrooming and leading to outcomes which have ramifications for both those interpersonal relationships, and for survival in the situation in which they arose.

The interweaving of informal and more formal sanctioning within the constrained situation of work (not excluding the inevitable intrusion of official labelling from 'outside') has highlighted the interface between hearing and hearing impaired, and the varying patterns of redefinition and re-negotiation of status which are perceived as possible. The venture into this particular field, where relationships must be sustained and where the opportunities for control of self-definitions are generally severely reduced has, I contend, contributed to an understanding of the way in which the hearing impaired, as a group, feel themselves to be economically disadvantaged in our society.

CHAPTER 7: CONCLUSIONS

The aim of this thesis has been to provide an exploratory study of a field in a way which, to the best of my knowledge, it has not been studied before. It represents above all an alternative way of looking, without in any way negating the validity of previous perspectives. It is an attempt to understand sociologically some of the processes which lead many hearing impaired people, across a whole range of communicative deficiency, to suffer under-involvement and exclusion in the work environment. Any conclusions cannot, by the very nature of the sample, be generalised to the whole hearing impaired population; but as indications I suggest they present a vital contribution to our understanding of the problem.

I have not, therefore, emerged from this research armed with a battery of facts and figures which would delight the pragmatist. Questions of 'how many?' or 'how much?' have not been the focus of my interest. I have been more concerned with exploring the varieties of experience as perceived by a deviantised group. Any practical policy recommendations I have made are posited on the hypothetical 'if ... then' consideration and stem from an appreciation of the inherent limitations of achieving significant changes in attitude prior to mobilising resources to legislate for changes in behaviour.

What I hope above all to have achieved by taking a societal reaction perspective is to have opened up the possibilities of discourse - between deaf and deaf, and ultimately deaf and hearing, by illuminating facets of a process common not only to many hearing impaired people, but to those with any kind of handicap. It is only the metaphor which is different. From an appreciation of the commonality of their devalued status I hope it is not too grandiose a claim to suggest that here, at least, are the foundations which could enable the hearing impaired to join forces - together with other minority groups - in articulating their demand for a better quality of working life.

The case for focussing on the signing deaf frame of reference is

now beginning to be well documented. What had yet to be made was a case for penetrating the symbolic universe of the orally deaf, stigmatised as 'hearers' by their signing counterparts - and sometimes stigmatising, in their turn, the signers. I would argue that the quest for the development of 'acceptable' speech and lipreading skills hardly denies the validity of their 'deaf experience', even though the aim is integration and location in the hearing world.

Similarly, little attempt has been made to penetrate the world of the profoundly prelingually orally deaf, with no means of communication other than home-made sign and gesture. I have identified them as the most disadvantaged, disparaged and neglected group within the hearing impaired and wider communities: disparaged from within and from without for their lack of communication skills appropriate to either hearing or deaf worlds. They are the true marginals .

This thesis represents an attempt to cut across all these barriers: to show that while there are indeed varieties of 'deaf experience' the signing deaf do not have a monopoly of this experience, the fascination of their own distinctive culture notwithstanding. What most hearing impaired have in common with each other, I have argued, is much more important than the ways in which they differ: namely, the experience - in varying degrees - of denigration and humiliation in confronting the hearing world.

I am aware that both sides of the divide may well find what I have to say unpalatable, unacceptable, or even threatening. I submit my findings, and the conceptual model on which they are based, in the hope that they will provide a focus for discussion and ultimately, even, point a way out of the 200 year old impasse.

My conclusions are governed by one caveat: that I am making statements of a kind and in an area where no sociological statements have been made at all. Of necessity, although presented polemically, a note of reservation must be introduced. They represent the first, not the last

words on the subject. This is not a definitive study.

1. MAJOR FINDINGS

I will discuss my findings under the following fairly broad themes:

- (i) The most obvious conclusion is that the hearing impaired respondents I talked with, as a group, did perceive themselves to be economically disadvantaged, suffering varying degrees of social and economic under-involvement and exclusion at work. Feelings of enacted stigma emerged as strongly as those of felt stigma. This confirms my initial speculation: that hearing impaired people do perceive themselves to be categorised in a fairly uniform manner by others - often at the lowest common denominator of competence - regardless of their obvious differences; stereotyping is sufficiently common and widespread adversely to affect their employment prospects. Any difference is one of degree rather than of kind. And imputations of incompetence in the crucial area of speech performance were generalised to obscure and deny competence in many other work activities.
- (ii) In the hearing dominated work environment it is effective speech rather than written language performance which, at the present time, is the more crucial factor in determining outcomes. The inability to master written English only becomes of real significance in determining the greater or lesser discredited status of already discredited respondents.
- (iii) The degree of one's communicative competence and to a lesser extent within that overall framework, the salience of one's resources, determine differential strategy management. Passing as a tactic for discreditable respondents generally gave way to normalising strategies at work. Options decreased as communication skills were defined as increasingly deviant. Deviance avowal, most commonly capitulation, if not partial role engulfment, were commonplace responses. However, I suggest it is misconceived to regard role engulfment as anything more than a partial and episodic response. Contrary to the social environment, sign language was found to be almost irrelevant

as a means of developing an effective counter stigma ideology at work. The protection of the deaf community did not seem to penetrate into the working world. Politicization as a strategy with which to confront the hearing employment world was hardly formulated. In the absence of any support from the deaf culture, the profoundly prelingually orally deaf were obliged to rely on the entrepreneurial activities of their parents and siblings to help with job finding and management

(iv) Employment constrains negotiation and bargaining options for all hearing impaired employees, in contrast to the much greater fluidity available in casual social encounters outside. Respondents' 'imperfections' were on public display in this sustained situation. The possibilities for control of definitions favourable to the self were often not sustainable. Moreover, there were certain 'no go' areas where only acquiescence was possible. Bargaining in other areas often took place within highly circumscribed parameters.

(v) The sequential nature of deviance defining has been highlighted. Exclusion from primary social and social/work-related interaction with work peers often leads to other deviant outcomes, mistakes, missed opportunities, trouble, and further deviantising. The process is not, however, necessarily irreversible or inexorable.

(vi) The creation and legitimation of limitations extrinsic to a hearing impaired person's handicap as intrinsic, and their rationalisation as 'insuperable obstacles', tended to justify exclusion, stigmatising and a refusal to look for alternative ways of getting round difficulties. A disinclination to bother, or take the trouble to make even minor adjustments was found to be perceived as a common response of work colleagues and employers.

(vii) The power of informal labellers to instigate deviant outcomes is as important as that of more formal and official labellers. The two levels are, however, inextricably interwoven. Work peers, nevertheless, were

often responsible for the escalation of incidents into crises. They acted as moral entrepreneurs, alerting employers and official labellers that 'something needed to be done'. And the stigma reactions of hearing colleagues added significantly to the internalisation of secondary deviant outcomes. There was, however, more scope for bargaining for favourable definitions of self at this informal level, than in confrontation with either intermediate or official labellers.

(viii) Some evidence emerged to support the findings in the literature that stereotyping is not necessarily modified in a situation of sustained interaction. Initial disruptive encounters tend to ensure that attempts will not be repeated. An arbitrary cut-off point seems to operate: minor 'deviations' in communicative competence could be contained and even tolerated to an extent; grosser 'deviations' could not.

(ix) The hearing impaired, in common with other impaired people, still adhere strongly to the work ethic. 'Significant living without work' has little relevance for them, and was perceived generally as a strong threat to self-esteem. Significantly, adherence to this hearing norm was also shared by signing respondents.

2. FINDINGS - A DISCUSSION: TOWARDS A NEW UNDERSTANDING

(i) What my findings have shown fairly conclusively is the almost universal tendency with which those who depart from the expected norms of interactional competence tend to be systematically categorised as 'undesirably different', regardless of individual differences in capability and competence. Negative evaluations of departures from acceptable speech performance tend to spill over to those whose communication skills are still relatively intact. And, in line with WEST's (op.cit) findings, imputations of unwholesome differentness tend to be located at the worst end of the spectrum.

Thus discreditable respondents tended to perceive themselves as

tarred with the same brush as their discredited colleagues as far as work capabilities were concerned - and often found themselves treated accordingly. Although stigma and stereotyping are by no means universal responses, most hearing impaired respondents I talked with felt they had experienced some, if not most, of the stigma reactions and outcomes I have described in Chapters 4-6; from the felt stigma of moral, socio-psychological shaming to enacted stigma in terms of exclusion from participation in the broader economic goals considered to be equally available in society.

Often definitions had preceded respondents, in the form of labelling at prior stages in their careers. Negative evaluations of work capabilities were merely a continuation of previously held definitions established at school, forming an unwelcome autobiographical kit with which to negotiate subsequent career options. Routinised classification by statutory placement officers, backed up by formalised institutional pressures, merely reinforced any deprecatory images. Importantly, even without such autobiographical baggage respondents often found themselves acquiring it by default, such is the nature of the common-sense stock of knowledge about 'the deaf' held by the wider society.

Similarly, once in work, both discreditable and discredited respondents perceived themselves to be excluded - if not actually segregated - from participation in both the social rituals of working relationships, as well as work-related information necessary to a meaningful and satisfying performance of tasks.

And so it was at the other end of the stigma reaction continuum I have been considering. Outcomes, in terms of job prospects, were generally perceived to be reduced. Underemployment, lack of promotion opportunities, a restricted range of jobs available, and a general sense of frustration at the reduced quality of working life characterised the perceptions of both discreditable and discredited respondents, although the degree to which they were able to resist enacted stigma varied according to the evaluations made of their communicative competence.

A closely related theme which emerged with some consistency is that of 'spread'. A trait which is, in varying degrees, evident or obtrusive is treated as representing the whole person. The very heterogeneity and uniqueness of each individual is obscured and the victim depersonalised. Thus the individual becomes nothing but an instance of a discredited category. Ergo the tendency is to assume that all members of that particular category are basically alike. Respondents were assumed to be incapable of performing tasks which they perceived themselves as quite capable of doing.

Little attempt was seen to be made to exploit and utilise the many undoubted abilities and capacities respondents possessed. In fact the perceptions of some respondents were such as to indicate other abilities were fairly systematically depressed. Communicative incompetence was seen to be equated with incompetence in every area of work requiring anything but the most routine tasks.

Thus it is in looking at how interaction with hearing colleagues and employers is perceived by the hearing impaired in and around the employment experience that an investigation of similarities in meaning structures between respondents covering such a disparate range of communicative skills has yielded such rich rewards. For only a small number of respondents could it legitimately be maintained that they felt their employment horizons had remained totally unaffected. And even they were not immune from fears of what a deterioration in communication skills might entail.

(ii) I have found it essentially the effectiveness of speech performance (and its accompaniments, skill in lipreading and in the management of a prosthesis) to be crucial in determining the differential strategy management patterns of discreditable and discredited respondents. Hence the fruitfulness of my particular model of assessing respondents according to an "Ease of Communication with .." Scale, and the whole notion of adherence to expected communication norms in determining outcomes. As was noted in Chapter 3 the primacy of effective 'standard'

speech in a hearing person's frame of reference for understanding social competence cannot be over-emphasised.

It is not that the ability to scribble memos or draft letters are of no importance. As stressed earlier, studies of modes of communication at work have indicated that it is face-to-face verbal communication which takes up the largest proportion of interaction time in any working day. Additionally, many of the respondents I talked with were not in the kind of jobs which would necessitate a great deal of writing. Yet many of them still felt stigmatised.

I have confirmed my speculation that it is the breaching of norms relating to ease of interaction with others which is largely responsible for the stereotyping and stigmatising of hearing impaired employees. Writing 'talk' is not just cumbersome: it is guaranteed to kill any spontaneity of interaction. And it is the maintenance of smooth social relationships which I have found to be so crucial in retaining employment. I have shown how the breakdown of this often has critical ramifications for employment prospects, both in terms of exclusion from vital on-going information and work activities themselves, and at the primary level of the escalation of small incidents into crises and trouble.

Whilst literacy and language ability are obviously prior skills, I have found that it is only when dealing with the discredited hearing impaired, with minimal or no speech skills, that a comprehension of written English makes a difference between discredited status and total defilement. Thus, literate respondents in Group V, Miss G.F., and Miss A.L., and signing respondents who could approximate 'standard' written English (Miss H.Q., Mr. G.C. and Miss R.C.) were better equipped to manipulate favoured definitions of self than Miss P.K., Mr. C.S. and Mr. M.R. (and signing, but illiterate Mr. D.S.) A combination of minimal speech and functional illiteracy renders one totally defiled and virtually impotent in the particular situation of work.

At the other end of the continuum, it is possession or acquisition of reasonably competent and effective speech which determines whether even partial acceptance by work peers is obtained and, in turn, determines one's ability to weave a path through some of the additional demands which employment imposes on communication skills. Discreditable respondents in the sample did generally perceive their employment prospects to be more open and varied than those of their discredited colleagues, by virtue of their speech and lipreading performance. There were some significant exceptions, however, where communicative competence made little or no difference to the outcome. These will be dealt with under (iv).

The possession of a more formal, stylised kind of speech was important when it came to what minimal access respondents had to meetings, handling the phone and, perhaps more importantly, in negotiating jobs with outside statutory placement officers and interview management. These areas apart, however, I found stylised communication skills to be less critical to 'getting on' at work than NASH and NASH (1981) suggest. What is important is the achievement of shared understandings through the commonly acknowledged, accepted and non-problematic use of spoken language. Stigma reactions were the likely results of an inability to adhere to hearing work colleagues' reliance on informal 'acceptable' speech.

(iii) I found communicative competence - and in some instances within this umbrella framework the whole armoury of a person's power resources - to be crucial in affecting the ability of respondents to redefine situations and self-images along desired lines in the on-going stigma contests of confrontation with a hearing dominated work environment. (There were equally cases where salience of resources made little, if any, difference). Where stereotyping and concomitant stigmatising have highlighted the uniform way in which the hearing impaired tend to be evaluated, it is in the differential capacity to negotiate bargains favourable to the self where differences are apparent.

Success in retaining or acquiring this communicative competence determined the kinds of strategies respondents used, their success or failure, and flexibility in the use of particular strategies, or combinations of strategies, for coping with different situations.

Normalising techniques were most commonly used by discreditable respondents in the relatively enclosed work setting. Passing was not a strategy that could generally be sustained, and was usually confined to very specific aspects of work (reflecting the situational nature of deviantising even within one particular life domain). Thus passing might be sustained in an engineering workshop where the noise levels were such that only gesture could suffice to communicate with hearing impaired and hearing employees; or the knowledge of one's 'blemish' might be confined to a few people 'in the know' - Mr. W.C.'s foreman, for example. Interestingly, this was not a practice which was much used. I have suggested that the necessary 'filling in' role which a 'wise one' might fulfil is, for the hearing impaired, highly visible and attention-drawing. The nature of the impairment precludes sotto voce strategies.

Most successful in terms of job retention and general harmony, and most commonly practised by discreditable respondents were the use of "accounts", explanations, humour, denial and rationalisation. Avoidance of the avoiders or withdrawal was also used, such as Mr. S.G.'s retirement behind a newspaper in the works canteen, or the avoidance of social rituals such as pub lunches.

It was found that as communication became increasingly 'deviant', options for successful strategy management progressively decreased. Deviance avowal was usually unavoidable. However, it tended to take the form not of a vigorous rebuttal of imputations of stigma which has been a fairly characteristic response on the part of the signing deaf socially, but of capitulation, or concurrence in the verdict of others.

It is interesting that in the employment situation, the signing

deaf found their language of little relevance either in negotiating improved statuses for themselves, or as an aid to interpersonal interaction. Its use was generally suppressed at work, for the very good reason that no hearing work colleagues or employers (save those of Mrs. S.T. and Mrs. N.F.) were remotely conversant with even the rudiments of sign. In only a few cases was it seen as eliciting interest and curiosity. More often it served as an additional abrasion and a source of ridicule where its use was known. Its users found themselves relegated to the status of their discredited profoundly prelingually orally deaf colleagues, as if they had no vehicle of communication at all.

Additionally, apart from acting as intercessors in the introduction to possible jobs, the deaf culture did not seem to provide the kind of protective buffer to insulate its members from repeated assaults on their self-esteem, a role which it performs so successfully socially. The incorporation of a counter stigma ideology with which to refute imputations of stupidity and incompetence was evidently too frail to hold its own in the alien environment of work. Noticeable for their absence were the kind of remarks which were made by signing deaf respondents in response to stigma encountered socially: "It doesn't bother me", "I'm used to it". Evidently at work, stigma did bother signing subjects. Apart from Mr. G.C. who worked with another deaf colleague, there was no surcease until the evening when respondents might go to the Deaf Club and regale their day's trials and tribulations.

Also it did not appear that any member of the deaf community came to the rescue when trouble brewed at work. VERNON and MA KOWSKY (1969) have commented on the lack of deaf leadership and authority generally. It may well be that in this context, a member of the deaf community is simply not regarded as having the appropriate authority as an intercessor. This in itself is stigmatising. Rationalised (MILES, 1983) on practical grounds, the "non-availability" of signing intercessors is indicative of the still

precarious nature of deaf signing militancy in the UK. The general lack of politicization as a strategy with which to ameliorate the work situation is in strong contrast to the American experience.

For the profoundly prelingually orally deaf, capitulation in the verdict of others appeared to be a common response to the harsher end of the stigma reaction continuum which tended to be their lot. Even here, however, it was found to be misconceived to equate role engulfment with apathy and total commitment to the deviant role. This was despite the fact that at interview, some respondents (Mr. M.R., for instance) seemed to give the impression of fixity of commitment to the deviant role with which LEMERT characterised his deviants.

The 3 respondents I 'interviewed' all had strong support figures in their Mums, whose role seemed to be to shelter them from the more damaging effects of what was perceived as a continuous assault on self-esteem - both socially and at work. Mrs. C.S., Mrs. M.R. and Mrs. P.K. had all been vigorously active in engineering job possibilities, dealing with Social Security problems which accompanied frequent bouts of unemployment, and generally helping to sustain an acceptable self-image with which their offspring could live. Denial and rationalisation still operated at this level. Mrs. P.K., to my consternation, for example, had asked: "P's speech. It's like normal isn't it?" happily answering the question herself with "No she doesn't speak like a deaf".

Yet such a role, in isolation from perceived support either from the deaf community or statutory social services is hard to sustain. Frequently, for example, Mrs. M.R. lost half a day's pay to accompany M. on his job searches, as only she could act as intercessor, it seemed. It is a role that social workers for the deaf seem ill-inclined to fill. I speculate that the orally, functionally illiterate, profoundly prelingually deaf do not present attractive clients to social workers. Perhaps, after centuries

of unrecognised and unrespected service as Missioners for the Deaf, social workers now find themselves, as often unique possessors of an arcane visual language, in the vanguard of a new and exciting pressure group. The temptation to concentrate on the signing deaf is given some credence by their zealous surveillance of 'outside' intrusions into their terrain.

Thus, although sufficient of my discredited respondents at the time of interview(s) perceived their situation in terms of engulfment, the whole point of taking a broad view of labelling as a process, in which both definer and defined are constantly engaged in manoeuvres, however small, to redefine their respective situations, means the situation is rarely static. The potential for social change is always there.

A longitudinal analysis would have revealed this process, I believe, with greater clarity. However, I am confident enough in its existence from the results of the corroboration interviews I undertook, where the perspectives of some respondents had changed. For Mr. E.B. and Mrs. N.F. this was very much for the better; for Mr. N.M. and Mr. H.H. marginally worse. Miss R.C. was making moves to improve her stake in the hearing world by trying to learn speech. And Mr. G.C. was about to confront the hearing world by attempting to obtain a qualification in youth service work.

(iv) However, strategy management was constrained by the very nature of the situation in which stigma contests took place. The work setting appeared to expose the handicapping nature of hearing impairment more ruthlessly than other life domains, so that the manipulation of situations was limited for all respondents, and disproportionately so for those whose severity of communicative incompetence was evident or obtrusive.

And for many hearing impaired respondents, across all Communication Groups (although less so in Groups I and II than in IV and V) control of much of their working lives was securely in the hands of others - hearing others. The circular nature of the stigmatising process will readily be

apparent: being stigmatised / relegates to one/a place at the bottom of the economic pile, further legitimating an inability to control one's own definitions of 'reality', and ensuring a continued place there.

Fear of eliciting irritation, impatience or ridicule sometimes led respondents to say they had heard and understood information, instructions or comments when they had not, leading to mistakes (Mrs. E.I. and Mr. F.J.) and the very exasperation the 'nodding syndrome' had been designed to avoid. Caught in a Catch 22 situation, exposure of one's shamefulness in being obliged to ask for help for example, tends to precipitate similar reactions.

The problems of sustaining broken social relationships have been shown to lead frequently to crises and irreversible trouble. At work, one is not free to withdraw from the situation. Incidents had a habit of escalating for those whose lack of 'acceptable' means of reducing tension - by laughter, banter, recourse to "accounts", explanations, apologies - was additionally penalised. For discredited respondents, taking one's way out of a situation is precisely what is problematic.

The tendency to be blamed for things going wrong was found to be common. Hearing definitions of 'what happened' tended to be accepted as 'the reality', the discredited hearing impaired, in particular, rarely getting a chance to 'tell' their version of the story. As stigmatised employees, their 'realities' simply carried no credibility.

Thus, despite my emphasis on the essentially innovative and dynamic nature of strategy management, the manoeuvrability, which tended to characterise negotiations in more casual, social situations outside, was severely circumscribed in this setting. A certain fixity of outcome was apparent.

It was not a case of adopting one strategy to deal with phones, meetings, instructions, one day and re-negotiating different strategies the following day. Any negotiation of one's status in the hierarchy generally occurred at the initiation of employment, and in the early stages of in-

teraction with hearing colleagues, where some consensus (or imposed consensus) was 'agreed' upon. Thereafter, bargaining over access to social and work-related activities tended to occur within fairly prescribed parameters. Exclusion from participation was the rule, being legitimated as part of the 'inherent limitations of the impairment'. Strategy management occurred within this framework.

Thus the value of extending an interactionist analysis into a situation which must be sustained, and over which most respondents have relatively little control, and contrasting this with the kind of casual interaction so eloquently described by GOFFMAN has proved salutary, (albeit the contrast has remained implicit). My findings bear out the contention of EMERSON and MESSINGER (1977): "While in fleeting public contacts with others, denial or withdrawal are readily available responses .. this strategy is not as available or acceptable in troubles arising in enduring relations .. Where exit is precluded, troubles and remedial strategies greatly increase in complexity".

I would suggest that the complexities tend to be small-scale, confined to the often ingenious manoeuvres which are often the only possible ways of alleviating constant assaults on one's self-esteem in a relatively enclosed situation.

Thus the small manoeuvres whereby the stigma attribute is 'displaced' on to the definer was quite commonplace. The tactic of contemptuously branding 'hearies' as "lazy", "always gossiping" and "stupid" for their inability to learn sign language was used by Mr. D.S. and Miss R.C. And recourse to day-dreaming helped to alleviate the tedium of Miss M.A.'s cleaning chores.

Otherwise options for all respondents to redefine the situation by the weaving in and out of discreditable/discredited status characteristic of more 'open' situations were largely absent. Reinforcement of one's deviant status greets the hearing impaired employee every day from his work colleagues. Escape routes, or a chance to radically re-negotiate one's status are minimal. This can generally only be effected by a change of

job. Even here I have shown how one's biography is liable to accompany, if not precede, any new definitions one might be able to impose.

However, in some job areas, not even a combination of communicative competence and salience of resources were sufficient to negotiate even marginally favourable definitions. It was at the level of more tangible outcomes that strategy management was effectively blocked, no amount of communicative competence allowing, for example, access to phone management, promotion, participation in meetings. Here, variations in strategy management between discreditable and discredited respondents were far less marked than might have been anticipated by the wide disparities in their communication skills. In these key areas for success in terms of 'making it' at work, stereotypes of incompetence were such that access was almost routinely blocked for respondents right across the Communication spectrum. Moreover, they were perceived by both discreditable and discredited respondents as 'no go' areas, thereby reinforcing the verdict of others. (Only Mrs. N.F., and to a lesser extent Mrs. S.T. managed to reverse their deviant statuses successfully - and Mrs. A.B. her potentially deviant status*). Stigma reactions and outcomes in these specific areas were, therefore, both similar in degree as well as in kind.

On the other hand, it was at the primary level of interaction, primarily with work peers, where options for manoeuvre were most favourable. Even here, however, movement occurred within fairly well defined parameters, and 'blockages' were not uncommon, such as exclusion 'automatically' from participation in gossip and social and work information - whether by default or deliberate avoidance.

Employment thus represents a fascinating staging-post in which to study the interface between hearing and hearing impaired, possessing, as it does, both the characteristics of casual social encounters and total institutions.

The differential capacity to impose favoured definitions in such a setting
*It was financial resources and perseverance in the face of professional advice to the contrary which enabled Mrs. A.B. to afford her "life-saving" commercial hearing aids and secure a well-respected job. Even so, these had not insulated her from rebuffs prior to this.

is compressed for all respondents, although communicative competence did make some difference to outcomes in some situations for discreditable subjects

(v) The sequential nature of the deviance defining process was also apparent in my findings. For the hearing impaired, once identified as possessing a shameful trait, a further set of potentially deviant outcomes tended to follow. There was, it must be stressed, nothing inexorable about this, contrary to the somewhat deterministic stance taken by some labelling theorists. As the previous section on strategy management demonstrated, definitions although often difficult to reverse are not totally impervious to change.

Neither do the phases appear to proceed in the orderly sequence implied by BECKER's (1963) study of marijuana users. And again, deviant outcomes were rarely arrived at in the sense of being the result of a deliberate policy or action on the part of the individual. They emerged and were constantly being re-shaped, although the process was not always readily discernible.

Again employment has been a particularly fruitful area in which the spiralling nature of deviance defining can be illustrated. Small beginnings, at the primary level of disrupted interaction between hearing impaired subjects and hearing work colleagues tended to snowball and set in motion a whole series of further outcomes: denial of access to social and work-related activities, and ultimately exclusion from participation in economic goals. And definitions do not stop there. An identikit of a stigmatised victim is built up and may be carried over into each potentially fresh employment situation, restricting possibilities from the start. What varied was the extent to which discredited as opposed to discreditable respondents were more likely to have travelled 'right down the line'.

If, for example, phone management is held to be crucial in obtaining the kind of work from which promotion is likely, exclusion from phone duties because of a reluctance to find ways round an 'apparently insuper-

able obstacle' leads to a diminished quality of working life, probable underemployment, and ensures further deviantising in the form of denied promotion prospects.

Rationalisations are then employed by the definers to legitimate their reluctance, by pronouncing the hearing impaired, as a species, incapable anyway. The process thus has something of a self-confirming aspect to it. Behaviour tended to reflect the negative evaluations which were perceived to be made of those with defective communication skills. Aspirations and expectations were found to be correspondingly reduced - a process insidiously affecting respondents from all Communication Groups. One deviant outcome sets the scene for further deviantising.

I need to stress again that this is far from inevitable. Reversal of roles was accomplished by two discredited respondents who capitalised on their deviant status by successfully entering professions for the deaf. Less striking successes, but successes nonetheless, have been found in the cases of Mr. E.B., Miss H.Q., and, potentially, Miss R.C. and Miss G.F. And, against all the odds, early definitions resulting from prelingual loss and relegation to the role of 'dummy' have been fairly successfully countermanded by Miss B.G., Mr. B.U. and Miss C.G.

Nevertheless, I have found the tendency for one deviant outcome to be followed by enhanced possibilities for further deviantising a not uncommon pattern in looking at the employment prospects of the hearing impaired respondents I talked with.

(vi) Perhaps one of the most dispiriting conclusions to emerge from this study is the creation and legitimation of limitations essentially extrinsic to a hearing impaired person's handicap as intrinsic, and their subsequent rationalisation as 'insuperable obstacles'.

It would be quite foolish to deny that hearing loss does pose limitations on some activities. However, throughout the whole employment story

from job application to 'making the best' of what is generally perceived to be less than the best, a consistent pattern has emerged. The intrinsic limitations imposed by primary hearing loss have been subtly confused with extrinsic constraints, which are by no means inevitable or necessary consequences of the primary inability to hear. That, for example, some discreditable respondents were deterred from even applying for a job with phone duties attests to the power of definers to rationalise and legitimise what is, in fact, an extrinsic limitation as a intrinsic barrier to being hired. (I have noted how in the U.S. the difficulties surrounding phone management are being overcome). But 'difficulties' do not constitute 'insuperable obstacles'.

I have found that the very fact such difficulties are considered 'insuperable' attests to the underlying pervasiveness of the very processes I have been describing. What appears to happen is that 'difficulties' are subtly translated into generalised ascriptions of incompetence and ineptitude. Exclusion from participation is thus 'justified' and a 'difficulty' is transformed into an 'obstacle'. Such is the internalisation of stereotyping, many respondents themselves perceived it as 'insuperable'.

A similar pattern has been found in many other activities at work, affecting, in varying degrees, most hearing impaired respondents I talked with, namely: missing out on things, the careless or deliberate exclusion from gossip, the truncation of information, instructions and communication generally, - often with significant ramifications in terms of missed opportunities, or mistakes; and the rationalisations seen to be made of a refusal to hire in the first place.

A further, related factor was found to be operative again, I contend, indicative of the fundamental nature of stigmatising the communicatively incompetent: the near total reluctance of work colleagues or employers to bother, to take the trouble of finding ways around difficulties. It in fact explains - and justifies - the many examples of perceived lack of

attempts at remediation, job tailoring and aid provision; and a fairly universal disinclination to take the trouble to ensure that the hearing impaired are 'filled in' on what is going on.

This tendency not to bother, and to reduce all interaction to the bare minimum necessary for task performance, particularly for discredited respondents, was found to be sufficiently common to suggest that this is far from an 'understandable' reaction either to the 'inherent' limitations of hearing loss, or to extraneous factors, such as the pressures of a busy office. That the discredited impaired are often simply left on their own to 'get on with it' is indicative of the dislike/fear/disgust which departures from acceptable communication skills arouse in many hearing people. As WEST (1969) has noted, hearing people "... don't like a universe that's absurd, a universe they can't understand; they can't bear the evidence of a quite impersonal, inexplicable organic mishap".

The hearing impaired thus tend to be doubly, if not trebly handicapped: by what are the inherent limitations of their impairment; by the concomitant stereotyping and stigmatising which deviations from expected norms of communicative competence tend to elicit; and by a subtle confusion of intrinsic with extrinsic limitations, leading to deviant outcomes in terms of exclusion from participation in social and economic life. Both discreditable and discredited respondents suffered from this, although the former, by virtue of those very skills in question, were able to temper the severity of the impact of this process to a greater degree than the latter.

(vii) One facet much neglected by societal reaction theorists is the power of informal labellers to create deviant outcomes. The social control exercised by official labellers such as the DRO was not unanticipated (although the almost negligible impact of communicative skills on outcomes arising from encounters with her was). The role of organisational imperatives in making similar evaluations of those hearing impaired with relatively intact communication skills, and those without, generally at the

lowest common denominator of competence, was an expected finding. And the outcomes, in terms of restricted job referral and range, the lack of trouble taken to explore possibilities beyond the routine, were found to apply to both discreditable and discredited respondents.

What has been much less well documented, however, is the power of peers and colleagues to stigmatise and create deviant outcomes. This has been an important result of investigating the informal interaction processes which take place in a setting such as work, where one might assume official definers had primacy. Irritation, impatience, social exclusion, ridicule, mockery and segregation were, in varying degrees, characteristic responses to those whose patterns of communication did not accord with expectations.

It is a moot point whether official or informal definitions are more detrimental to self-esteem. It is conjecture on my part, but it would seem that it is the inculcation of informal social controls and sanctions which tends to lead to internalisation of what I have termed secondary deviant outcomes - perhaps because informal labellers are harder to identify, pinpoint and confront. Such intangible outcomes as erosion of self-confidence, strain, anxiety, frustration, job insecurity, isolation and a profound sense of restlessness seemed to parallel the more intangible sanctioning process. They are as likely to be manifestations of this informal process as from any official labelling - the one generally being chronologically prior to the other. It seemed that exclusion from participation in the social network at work had serious consequences in terms of the preservation of one's identity. It provided the backdrop against which more tangible outcomes were negotiated. Whilst agreeing with MEAD (1934) that one's core identity is laid down in early years, the sustaining of a favourable self-image is, to a large extent, fashioned by the kind of social relationships people make outside their immediate families - particularly at work.

What I was quite unprepared for was the extent to which informal

labelling quite often led to serious tangible outcomes as well. It was largely in response to stigma reactions of 'taking the mickey' and constant exposure to goading and ridicule which led to 'trouble'. This was something which particularly affected discredited respondents. Unable to retaliate in a language which could tap those common-sense shared understandings between hearing people, discredited hearing impaired respondents with minimal speech competence often had a lengthy history of rows, fights, walk-outs and dismissals.

It seemed that where informal labellers' power was most insidious was at the level of instigators; as 'mini' moral entrepreneurs it was evident that hearing work peers were in a position to alert employers and supervisors that 'something needed to be done'. When trouble occurred, employers were brought in to solidify and make the verdict 'respectable'. Stereotyped as incompetent, it was rare for discredited respondents to be given the chance to relate their version of the story. That of the hearing employee was generally paramount.

Whilst it has been argued options for redefining one's status are most open to flexibility at this primary level of interaction at work, such options nevertheless took place within quite restricted parameters. For discreditable respondents, stickiness and unease, impatience and irritability were generally containable. Increasing deviation from expected communication standards rendered its victims intensely vulnerable to more punitive sanctioning by their hearing work peers. And one cannot walk out of a work situation without jeopardising a whole host of subsequent options.

(viii) What was also interesting was some evidence to support the contentions of writers such as FARINA and RING (op.cit) and KLECK (op.cit) that the harshness of stigma reactions does not necessarily tend to be modified in a situation where interaction has to be sustained. A quite arbitrary cut-off point seemed to be in operation. It appeared that a degree of communicative 'deviance' could be contained and even partially

tolerated within the work situation, despite periodic eruptions of annoyance, unease and irritability on the part of hearing co-workers, and constant strain and eroded self-confidence, particularly on the part of discreditable respondents. Although Mrs. A.H., for example, had been 're-integrated' into her old firm once following the sudden deterioration in her hearing, her experience was one of cumulative avoidance by colleagues.

For those with little or no acceptable communication skills, however, the pattern appeared to be one of a bruised, horrified, initial encounter, followed by a firm disinclination to pursue interaction further. Hence the total social ostracism of respondents such as Miss P.K. who was simply left to her own devices each day. Moreover, the demonstration of task competence appeared to do little to modify a respondent's social acceptance within the work setting. With Mrs. S.T., it eventually earned her the grudging respect of her supervisor, but did little to ameliorate relationships with her co-machinists.

(ix) Finally, what has emerged quite strongly from this study is an adherence to the work ethic, despite the constant degradation, humiliation, and exclusion from social and economic goals to work fulfillment which were seen to be the lot of many respondents in this sample. I would suggest that in the absence of any move towards establishing a positive framework with which to fulfil the functions, particularly the social function, which work serves, the phrase 'Significant Living Without Work' has, as PETER LARGE (1982b) suggested, an ominous ring to it. It may well be a technological and economic necessity. It is hardly surprising that it was not perceived as such by the vast majority of respondents I talked with, who regard themselves well to the forefront of the queue in the dumping process when the labour market tightens further.

The very possession of a job seems to provide for most respondents, the most significant means of redressing an otherwise unpalatable image of self - even though, paradoxically, it was often an image reinforced

in the work process. Unemployment threatened their self-esteem. To have a job is the passport to even quasi-acceptance in the hearing world.

Without a job, many discreditable respondents, whatever the level of their present occupation (and underemployment was perceived to be fairly commonplace by some), thought they would be doubly stigmatised. It was only the utterly discredited respondents, Miss P.K. and Mr. M.R. in particular where the 'necessity' of the work ethos was even remotely questioned; and Mr. M.R. the only respondent apparently content to 'put his feet up'.

It is significant that adherence to the work ethic was also shared by signing respondents when specifically hearing goals in other spheres, such as mainstreaming, are currently undergoing fairly critical re-appraisal by the deaf community.

In conclusion I contend that a study of interaction in and around employment has provided a unique opportunity to examine the construction of perceptions the hearing impaired have of their hearing colleagues and employers, and the ways in which negotiation for more favourable definitions of self are manipulated in a situation where control is often securely in the hands of hearing others. The adoption of a societal reactions perspective has, above all, enabled me to demonstrate my central argument in a way in which an alternative perspective could not. Throughout the empirical analysis, the relative uniformity with which ascriptions of stupidity and incompetence are seen to be applied quite indiscriminately to many

hearing impaired respondents has been shown. At the same time, the application of a broadly based deviance model, stressing the relativity of the deviance defining process, its situational and sequential nature, has enabled me to illustrate the variability of patterned adaptations to imputations of stigma - and the variability of outcomes, even if limited.

Whilst research into such areas as family dynamics remains relatively untouched (apart from studies of relationships between deaf children of hearing parents where the offspring have now joined

joined the deaf culture - (ALTSHULER et al, 1963; MEADOW, 1968c; BENDERLY, op.cit; and BECKER, 1980), the extension of an interactionist model into the world of work has, I maintain, been richly rewarding. It is one of the key areas where contending with majority hearing norms concerning the primacy of speech is at its most salient, and where deviations from 'standard' communicative skills are at their most exposed and vulnerable.

3. A GLIMPSE INTO THE FUTURE: SOME IMPLICATIONS FOR FURTHER RESEARCH

This raises the question of the implications of this thesis for future research. I would suggest that this is not a situation confined only to the hearing impaired. It is conjecture on my part, but a most useful area of enquiry would be to look at the applicability of my findings to those suffering from other disorders of communication - aphasics, stutterers, male lisps, the mentally retarded and the blind. And applicability does not rest there. It may well be found, as I contend, that this research has wider implications for the entire impaired population as well as other minority groups (cf. MATTHEWS, 1979). It is precisely what happens at this micro level of interaction within a setting geared to 'getting on' which determines the extent to which other stigmatised people are denied acceptance and access to the social and economic goals of our society. The metaphor may be different. The process is fundamentally the same. It is particularly because impairment breaches our folk notions of how interaction should proceed that I regard a societal reaction perspective as being relevant to those with both motor and sensory impairments. All, in varying degrees, suffer shaming and concomitant discrimination. The possibilities such a comparative study would open up cry out for attention.

From the many dilemmas and impasses which beset this project, several other possible areas for future research in this field suggest themselves.

A more tightly integrated theoretical approach could provide further insights into what has been a preliminary excursion into uncharted waters. To counteract some of the purported weaknesses of the labelling perspective,

for example, it would be useful to have some empirical validation of the findings, along the lines indicated by the works of SCHEFF (1964), RUSHING (1971), GREENLEY (1972) and, particularly, ROSEHAN (1973). Possibly the closest approximation to 'shared meanings' which can be achieved without actually being deaf, could be explored by research workers willing to subject themselves to wearing ear plugs (with masking)^{*} for 6 months, thus both simulating and actually experiencing a degree of hearing loss, and presenting themselves as prospective candidates for employment. The experiences of BENDERLY (op.cit) using such a device for one day have been salutary. For the hardy participator, such an exercise would provide an excellent opportunity for testing some of the basic tenets of labelling theory.

Further, a longitudinal analysis, for example, would enable researchers to investigate the applicability of the notion of deviance as a moral career: something which received attention from the earlier labelling theorists, notably BECKER (1963). It was considered by WEST (1979) to be one of the most fruitful concepts emerging from the application of this perspective to his study of epileptics.

Whilst it has been my concern in this thesis to focus largely on the process of informal labelling, it was nevertheless both impossible and highly misleading to ignore the role of more formal sanctioning authorities. Suggestions have been made throughout the text of the desirability of investigating the role of audiologists and other paramedical personnel, social workers and teachers of the deaf as agents of social control. All are instrumental in the compilation of a biography of a hearing impaired person, which may well have its most critical impact in the provision of testimonials and references for prospective employers. As professional helpers, the possibility that they may also act as depressers of ambition and occupational aspirations has not only been suggested in the literature (cf. Appendix 1), but has been described by one or two respondents. This is obviously an area ripe for investigation.

* For an explanation of this term, cf. p. 415

Alternatively, other theoretical perspectives, such as a Marxist-orientated approach, looking at the differential relationship of various groups of the hearing impaired to the mode of production and exchange could well yield equally fruitful insights into the manner in which the hearing impaired perceive themselves as economically disadvantaged and oppressed in our society.

An investigation into the relationship between socio-economic status and employment outcomes might also produce some interesting results. The literature informs us that the hearing impaired are under-represented in professional and managerial positions (and this study confirms that hearing impaired respondents certainly perceive themselves to be so under-represented). How far is this related to social class? To what extent does social class affect the options for strategy management in unskilled and semi-skilled occupations, where, by definition, an employee has less control over his working conditions? (A few tentative indications only have emerged from this study).

My initial ambivalence regarding the merits of a combined quantitative and qualitative approach to a subject of this nature, and its somewhat tardy resolution, have perhaps meant that the full richness of what interpretative sociology has to offer could well be developed further. I am thinking of a small-scale, intensive study, of at the most 5 - 8 subjects, along the lines adopted by SHERWOOD (op.cit), using a thematic rather than a somewhat more structured approach to interviewing.

Ideally, if ethical objections against its use could be overcome, the field is wide open for participant observation, both in the pre-employment stages of job hunting observing encounters with the statutory placement officers, in actual job interviews, and in the work setting itself. This would enable the 'realities' of both definer and defined to be explored and conceivably open the door for the establishment of a mutually productive dialogue. One side of the dialectic, however necessary it has

been to explore, represents, after all, only a partial 'truth'.

And, whilst employment has been a particularly fruitful area in which to explore the interface between hearing and hearing impaired, there are other life domains of equal importance for our understanding of the social processes in operation which relegate the hearing impaired to marginal status in our society: such as the family dynamics of those postlingually deafened; relationships with professionals and professional organisations; confrontation with the medical and para-medical bureaucracy (including the experience of hospitalisation); dealings with the legal system; and coping with the ramifications of our Welfare State - claiming Social Security, Unemployment Benefit, rent and rate rebates etc. - difficulties with which were mentioned by several respondents I talked with.

Lastly, but this by no means exhausts the list of possibilities, the policy implications of my thesis could be explored in much greater detail than I have chosen to do. As DARLING (1979) suggests: "Studies of the adaptations achieved by these 'deviant' (sic) members might also be of importance to policy makers and other societal representatives who evaluate existing social definitions and the consequent treatment these members receive from various 'service' agencies".

Some of the patterned adaptations to stigma and stereotyping and their varying success/failure, have been described. Although I shall go on to outline a few areas where policy change might be implemented in the short-term in an attempt to alleviate present injustices, the medium and longer-term policy issues require a much more extensive exploration than the constraints of this thesis allow. Indeed, the urgency of planning appropriately for short-term needs can, perhaps, only be adequately addressed by exploring the future dimension.

In the mid-term, research could well address itself to such questions as: should we be pressing governments to invest money in schemes to enable the hearing impaired - along with other impaired people - to participate more effectively in a workforce with a growing unemployment rate? Or

should we, alternatively, be investigating ways of redistributing the work 'available' and planning positively for those who have particular difficulties in competing to receive a guaranteed minimum wage from the State in return, perhaps, for some kind of community work? Could this be done without creating a second-class citizenry?

Further long-term considerations open up exciting prospects for this very particular group of the handicapped. The development of modern telecommunication techniques is likely to have profound implications for future working patterns. Increasingly, people will be working at home rather than in a structured work environment, dealing essentially with visual rather than auditory material, via two-way TV terminals. The present emphasis on oral communicative competence and smoothness in the management of interpersonal relationships is likely to give way to visual competence requiring a high degree of literacy. The opportunities for stigma and stereotyping by work peers and employers may be significantly reduced. If this is so for the hearing impaired, it is likely to have similar implications for the economic participation of other impaired people. Training in the use of such technological know-how needs to be planned well in advance, and this is an area ripe for assessment now.

I have indicated only one or two directions in which the implications of my thesis could be fruitfully explored. The policy questions are almost infinite, and the possibilities for future research, to my mind, exciting and exhilarating.

Rather than providing specific answers to specific questions in accordance with pre-formulated hypotheses, it is my hope that this thesis has laid the foundations on which others may fruitfully build. In offering an alternative way of looking at the 'taken-for-granted', and challenging some of the most tenaciously held assumptions which have dominated - and continue to exert a stranglehold - on the world of the hearing impaired, I hope to have succeeded in "jostling the imagination" for such research

to materialise.

4. SOME RECOMMENDATIONS

Such recommendations or solutions I have to suggest are predicated* on something which the very operation of stigma virtually precludes: a change of attitude on the part of informal and official labellers. What can one effectively do about stigma and stereotyping? The process of scapegoating minority groups who are not in a position of power to impose their definitions of 'reality' upon the majority is as old as history.

And I am singularly sceptical about the efficacy of education or re-education on its own to change attitudes. In the first place it is a lengthy process. Moreover, there is little evidence to show that, divorced from a wider political perspective, it is effective. CUMMING and CUMMING's (1957) experiment in trying to educate the host community to re-accept their discharged ex-mental patient friends and relatives back into the community was a failure. It was a failure courageously and honestly described. Yet the authors still demonstrated implicitly their reliance on a 'more informed' education programme to rectify their mistaken preconceptions.

Additionally, I contend that WEST's (op.cit) argument regarding the failure of the British Epilepsy Association to promote understanding and sympathy "because the message is often at odds with peoples' expectations" insufficient.

After much mental vacillation I am of the opinion that any significant change - not necessarily in attitudes - that is a luxury -, but in behaviour can only come about with the backing of legislation. It is stigmatising behaviour which must be proscribed. Ultimately, with the help of education, changes in attitude will hopefully follow.

* Fundamentally they are predicated on the assumption of a general if not universal consensus on Utilitarian human values concerning the maximisation of human happiness and the minimising of human misery. If the kinds of disadvantage and discrimination which the hearing impaired in this research claim to suffer - and suffer in common - are held to be unjust in a civilised society, then certain things may follow. I am not a moral arbiter. The justification for making specific recommendations rests on the antecedent life.

Thus, although it goes against the very tide of history, and the current militancy of the signing deaf, I plead a case for the hearing impaired population as a whole to bury their differences and present a forceful, united front. To fight for the recognition of sign as a language may well be a necessary pre-requisite, but ultimately it is but one issue amongst many. A relaxation of the contempt in which sign has traditionally been held will not resolve the many other areas in which discrimination against all hearing impaired is seen to occur. The development of a 'collective consciousness' (SCHUR, 1980) reflects precisely the thrust of this thesis: that an appreciation of the commonality of shared experience of stigma and stereotyping might provide the foundation for the initial political thrust for change.

This is not the place to enter into arguments concerning whether and how far the law is 'entitled' to go in promoting social change. As to what legislation might be expected to achieve, it is useful to have an exemplar. I suggest we turn to the States for a model. Whilst I contend that CORAD (1982) is over-optimistic as to the efficacy of sections 503 and 504 of the Vocational Rehabilitation Act - and the National Center for Law and the Deaf has carefully documented the widespread nature of non-compliance (1979) - the law does provide a base-line from which society might re-define its frame of reference towards hearing impairment.

More important is the symbolic significance of having prescriptive legislation on the statute books. It tends to create and reinforce a climate which is conducive to further success, and is likely to encourage the stigmatised group to greater efforts at mobilisation.

For a stigmatised group, there are additional hurdles. The hearing impaired population has been noted for its lack of politically active and effective leaders - from both 'camps'. Yet the prior political thrust necessary for legislation to be implemented requires such a corpus of leaders, with competence in the majority language. Without it, even the boldest confrontation strategy tends to lack credibility. It is perhaps here that either the orally deaf, competent in S.E.E., or the signing deaf able

to straddle both deaf and hearing worlds, have a role to play as spokespersons. It is essential to obviate the distortions arising from different meaning systems between hearing and hearing impaired worlds of experience. The experience and meaning structures arising out of being deaf, communication mode apart, must override the differences which result from different socialisation processes.

Broad anti-discriminatory measures apart, ideally what I should like to see legislated for, as far as the hearing impaired are concerned, is provision to cover three areas of need which have been identified in my findings: the mandatory provision of equipment, such as TDDs ; the appointment of intercessors to act as secretaries and 'interpreters' for both the orally and manually deaf, and to resolve any on-going problems arising in the work situation; and the training of either DROs, or other personnel in the particular communication needs of the hearing impaired, to improve job referral services and assist in interview management.

The reluctance of employers to instal equipment which would enable a hearing impaired person to perform his job with greater ease, or to perform a job for which he is in all other respects perfectly qualified, has been repeatedly demonstrated in this thesis. It has been argued that such reluctance is all part and parcel of the stigmatising and stereotyping processes. Given that attitudes will probably not change radically with education and gentle persuasion, I suggest that legislation is implemented to require compliance with the provision of aids. Its cost-effectiveness over time must be weighed against the economic and human cost of economically unproductive lives, under-utilised capacities and skills, and untrained capabilities.

What has also emerged has been the absence of anyone sufficiently conversant with the inherent communication problems of the hearing impaired to act as an intercessor. The appointment of even part-time personnel, with both signing skills and experience in communicating with the orally

hearing impaired, would greatly facilitate on-the-job orientation and, what is crucially lacking, feedback. Moreover, mistakes, misunderstandings and disrupted relationships could be sorted out without fear of incurring opprobrium.

Most of all what seems to be needed is the presence of a respected intercessor at the point before trouble breaks out. As I have shown, it is rare for a social worker to be called in until the situation has deteriorated beyond repair, and the hearing impaired person either stormed out or been dismissed. The presence of an 'interpreter', sensitive to the kinds of ridicule which I have documented as an on-going part of the work experience, particularly of discredited respondents, could well prevent such trouble from arising in the first place.

It will be argued that the mandatory appointment of such personnel is hardly cost-effective in a firm employing one, or at the most two, hearing impaired people. I suggest, therefore, the appointment of peripatetic workers, regionally based, and able to liaise with firms in the area employing other hearing impaired workers, and possibly geared to performing similar functions for other impaired personnel who experience difficulties. It may well transpire that the appointment of such a person would stimulate firms at present hostile to the idea to hire hearing impaired people in jobs appropriate to their skills and capabilities.

I am aware that this is, supposedly, part of the function of the DRO. However, in no case in the sample was I aware of intervention of this kind. Whilst the DRO has become a fashionable target for criticism, the recent Government decision (29th July 1982) to preserve the present system basically intact does place the onus of responsibility squarely back on the service substantially to improve its delivery, or to acknowledge work loads preclude this and syphon off in-depth liaison work to others.

My findings have borne out those of BEATTIE (1981) of the total inadequacy of the DRO service - at the point of delivery, and at the crisis in-

tervention point discussed above. Whilst, perhaps, little can be done at this stage to change the organisational imperatives which generate a reluctance to think creatively beyond the traditional, stereotyped images of the kinds of jobs 'the deaf' are capable of, what can be improved are the DROs' communication skills to facilitate interview management and job orientation.

I am not suggesting that DROs should be required to learn sign, although a rudimentary knowledge of a few courtesy signs would be appreciated. Finger spelling, however, is quick and easy to learn and could make that critical difference between being perceived as willing to help and being patently uninterested. Their training should be expanded to include instruction on at least the basics of communicating with all groups of the hearing impaired population, both manually and orally impaired. A service which exists, ostensibly, to help those with impairments to locate job opportunities is demonstrably inadequate when consultation by some hearing impaired clients is impossible because the DRO is not versed in the appropriate communication skill.

This much, I suggest, may be accomplished by legislation, together with the backing of an organisation comparable to the Equal Opportunities Commission where cases of non-compliance can be taken up.

I am less sanguine regarding the prospects of improving those informal interpersonal relationships at work which, as I have indicated, are as powerful in the creation of deviant outcomes as are the definitions of official labellers.

However, if it is seen that the Government is making a concerted effort to improve access to some of the more tangible barriers from which the hearing impaired are traditionally excluded, it is my hope that a change in behaviour will indeed, ultimately, bring about a change in the way the hearing impaired tend to be negatively evaluated.

In the final analysis, I come full circle. Legislation and the neo-

essary prior political thrust will only come from a group which has managed to overcome the many factors which would fragment it. And it is only through the medium of interaction that people are enabled to recognise the commonality of their problems and interests, and appreciate that these are located socially, rather than inhering in the individual.¹ Manually and orally communicating hearing impaired - despite an understandable mutual distrust borne of years of reciprocal shaming,-need to interact with each other to appreciate that theirs is one and the same problem.

I derive very considerable reassurance from the conclusions drawn by HIGGINS and NASH (1982) at the Sociology Conference at Gallaudet, 1982. For the first time, those very sociologists who have done so much to penetrate the perceptions and meaning systems of the signing deaf community have shown themselves open to the wider issues. They conclude: "As we explore the lives of deaf people, we will be greatly aided if we are alive to the experiences of those who are similarly situated in society. Thinking and research about black Americans, ethnic groups, gays and disabled individuals can sensitize us to possibilities among the deaf .. They too are outsiders in their own way. From knowledge of the struggle of these other outsiders in their coping with the dominant society, we may get a better understanding of the struggle of deaf people".

Written towards the end of my research period, it is, to the best of my knowledge, the most positive and coherent statement in the entire body of literature on the hearing impaired, which suggests attention might be drawn to the wider implications of minority status for the signing deaf. For this thesis, doing the unthinkable, and comparing how different groups of the hearing impaired perceive their situation is, perhaps, thinkable after all.

NOTES

1. On 11th February, 1983, a Private Member's Bill, The Disablement Prohibition of Unjustifiable Discrimination Bill, had its second reading. It was defeated. Significantly, however, deaf people attended and sat in the public gallery, following the proceedings with the aid of an interpreter.

POSTSCRIPT

It came to my notice on completion of the writing of this thesis that a Conference had been held in Washington in January 1983 bringing together organisations of the hearing impaired to discuss ways in which co-operation could be facilitated to achieve common political goals. These organisations included representatives from both the signing community, such as the National Association of the Deaf, and the orally hearing impaired, such as the Alexander Graham Bell Association.

It is significant that the following even needs saying:

"Considering the number of organizations in the deafness field, we do not currently usually compare notes on the positions and interests of our organizations. Without this knowledge we run the great risk of dissipating our energies in the government relations area by cancelling out each other's efforts through contradictory statements ... My personal observation is that we can occasionally honestly disagree on some things, but we should be aware of our differences and consider them carefully so that we will not destroy our overall government efforts or reduce our effectiveness in those many other areas where there is positive consensus among us".
(PIMENTAL, 1983)

The response (HURWITZ), from a "deaf consumer" was predictably cautious, indicative of the threat oralism is still seen to pose to the signing community.

It only remains for me to hope that this thesis represents a modest contribution to an understanding of the basis of that consensus which affects all groups of the hearing impaired, and that in time a similar conference might be mounted in England.

APPENDICES

Volume 2

APPENDIX 1: REVIEW OF THE LITERATURE

Reference was made in Chapter 3 to the reasons why a Review of the Literature on Employment had been omitted from the text. Before I rectify this, however, the dearth of sociological analyses of hearing impairment generally, until very recently, will be discussed. It is an omission which has been reflected in the way the employment problems of the hearing impaired have been written about.

1. SOCIOLOGY - A NEGLECTED DISCIPLINE

It should be noted that the study of communication itself has been relatively neglected in sociology, until the advent of the symbolic interactionist and ethnomethodological schools of thought. Other studies have been largely fragmentary, implying "... a view of social communication as a series of discrete areas of experience without much connection" (McQUAIL, 1975).

FURFEY and HARTE (1964) have commented: The social aspects of deafness have received remarkably little attention from sociologists. Yet it is evident that deafness, with the communication problems it involves, most profoundly affects interpersonal relations" (my italics).

Until the late 1970's and early 1980's the few sociological studies which have been conducted on hearing impairment have generally focussed on sub-cultural theory in relation to the profoundly prelingually deaf, who, it is argued, tend to form deaf communities with a counter-ideology of their own (LUNDE, 1956). An in-depth analysis of the way such communities functioned and their relationship with the hearing world 'outside', however, awaited more sophisticated attention.

Three other studies merit attention as much for their singularity as for their general quality: those of GORMAN (1960); SUSSMAN (1975) and WEINBERGER (1978).

Dr. Gorman's seminal study focusses on the "very deaf" (largely the profoundly prelingually deaf). Deaf himself, the author analyses his data in terms of role theory and reference group theory in an attempt to discuss

" the existence and effects of various forces which determine the role of the deaf person".

His scope is wide-ranging, covering the field of education, employment,

family relationships, attitudes of significant others, and communication. Yet his grip on his theoretical perspective is fully maintained, and an insightful and meaningful picture of the deaf person's world and the modified roles which the hearing person is prepared to make available to him, and the deaf person's acceptance of them, are revealed.

A.E. SUSSMAN's very satisfactorily argued thesis uses the self-concept theory of MEAD (1934) and identifies the very negative self-concepts which are generally held by the deaf, and which tend to be projected not only on to the hearing, but on to other hearing impaired people. He stresses the mutual interdependence of self-concept and perceived attitudes of significant others: in MEADIAN terminology, how an individual views (and interacts with the world is partly a function of the way he views himself - and the views of self are determined by the extent to which the "role of the other" is integrated. It is a sophisticated theoretical analysis, but again applies/largely to the profoundly prelingually deaf (for whom he is currently a counsellor).

The few other 'self-concept' studies (HEIDER and HEIDER, 1941; MURPHY, DICKSTEIN and DRIPPS, 1960; HELEN CRAIG, 1965) suffer from a failure to examine the particular social situations in which self-image formation functions. Whilst they often comment perceptively on the importance of significant others' appraisals in the creation of self-appraisal, they fail, as GARRISON and TESCH (1978) point out, to treat self-concept as a "specific and relational construct".

A third exception is the work of WEINBERGER. However, after a chronological review of the various aspects of labelling theory, he then proceeds to subject his data to a stiff statistical analysis, losing sight, somewhat, of the perspective he has so thoroughly explored. Perceptions may be measured but are not described by statistics. He suggests, not without some justification, that it is necessary to exercise extreme caution in making broad inferences about the utility of labelling theory, taking a

GOVIAN (op.cit) view of the alleged limitations of empirically verifying any data. However, contrary to the established pattern to date, he focussed on those with newly acquired hearing loss. But no effort was made to extend his analysis to other groups of the hearing impaired or to integrate data and theory more meaningfully.

These exceptions have been literally oases in an otherwise barren terrain. What is puzzling is that until the publication of HIGGINS' (op.cit) book in 1980, none of these previous works appears to have triggered off a general reaction amongst other sociologists.

In an attempt to explain why the deaf have so systematically eluded the attention of sociologists, it is pertinent to examine where research has been directed. Generally it has been fairly consistently wedded to what might be called an 'individual pathological' (or 'individual systems', SCHEFF, 1966) model. There has been a proliferation of studies of so-called 'socio-psychological adjustment', the best examples of this genre being the works of LEVINE (1961) and MYKLEBUST (1964). For the 'hard of hearing' and those with acquired hearing impairment, the works of KNAPP (1948) and RAMSDELL (1978) typify this approach. The profusion of such studies has led to a veritable pot-pourri of findings relating to IQ, social maturity / immaturity, extraversion/introversion/ and personal 'adaptability'.

Not only do such studies tend to individualise - and de-politicize - the problem, suggesting that alleged deficiencies inhere within the individual rather than being socially constructed. They also lead to "... an insistence on 'remedial' measures and a belief in 'normalisation' which, given the irreversible nature of most profound deafness, constitutes a psychiatric denial reaction" (MONTGOMERY, 1980).

This is not to decry the importance of such studies. But they represent only one side of the picture. It is impossible to 'make sense' of the individual pathology or 'individual systems' model divorced from an analysis of the way impairment of any kind is a socially constructed phenomenon. It is the mutual interdependence, the complementarity of the two,

which give coherence and a better appreciation of the problem.

Attitude studies and surveys which might conceivably have had a bearing on the development of a sociology of hearing impairment have similarly flourished. Exemplified by the latest offering from the O.P.C.S (BUNTING, 1981), they form part of a fairly long tradition in research (cf. HOROWITZ and REES, 1962; SCHROEDEL and SCHIFF, 1972).

Obviously such studies have more than just a superficial attraction. They are regarded as an infinitely more 'productive' means of approaching the 'problems' of the deaf. The methodological and practical difficulties involved in actually communicating with the hearing impaired for research purposes are conveniently by-passed. Indeed, some of their findings, even if sometimes contradictory, are often salutary. Deaf children, for example, are found to be "low on the totem pole of desirability" (MURPHY, DICKSTEIN and DRIPPS, op.cit), when hearing teachers are asked to rank what types of impaired pupils they prefer to teach.

However, the problems with attitude studies are legion. Not only is it difficult to demonstrate how far they predict actual behaviour; they may "...reflect more tolerant attitudes than actually exist because respondents feel pressure to voice socially acceptable opinions" (RYAN, KEMPNER and EMLLEN, 1980) - a point made by ALTMAN (1981) and others. This will become evident when I come to discuss the literature on employers' attitudes to hiring the hearing impaired.

BUNTING's (1981) study is a perfect example. As with all attitude surveys conducted by hearing people, they are for the consumption of hearing people. It is the definitions and evaluations of the hearing which prevail, legitimising the low status of the impaired in society whilst simultaneously purporting to ameliorate it (FINKELSTEIN, 1980). There is no opportunity for the hearing impaired to modify and correct many of the cruder and jejune cultural stereotypes which are often manifest. They may easily enter the corpus of received wisdom which is constructed 'about the deaf'. Stereotypes are reinforced and are correspondingly difficult to

dislodge. Thus "The reasonably good understanding of deafness" (reported in Hearing, 1981) which Mr. Hugh Rossie, Minister for the Disabled, felt emerged from the study is hardly reflected in the perceptions of the hearing impaired themselves. As BENDERLY (op.cit) notes, few Americans have actually met a profoundly deaf person.

I suggest, therefore, that attitude studies, far from contributing to a climate in which a sociological evaluation might take place, have the insidious effect of simply legitimating the status quo by telling people what they want to hear.

Otherwise, research literature has concentrated massively on studying the legacy of linguistic devastation of 150 years of oralist education. The literature is too vast for more than bibliographic reference. The study of sign language itself has burgeoned, both in an attempt to disprove the claims of the oralists, and in an effort to give it status as a language in its own right, and remove the stigma attached to a minority communication mode. Latterly, research has focussed on 'Total Communication' as a means of 'resolving' the oralist/manualist controversy.

Thus, looking at the directions which research has taken over the past 20 years, it is perhaps not surprising that sociology has had so little part to play. The primacy of the 'medical model' of individual pathology, which has accompanied the growth and prestige of the paramedical professions of audiology and educational and clinical psychology, has ensured that 'the problem' is firmly located in the purported deficiencies of the individual. Hearing impairment as an essentially social construction has been mystified and obscured.

The publication of a cluster of books in 1980/81: HIGGINS' "Outsiders in a Hearing World", BECKER's "Growing old in Silence" (1980), and NASH and NASH's ethnographic "Deafness in Society" (1981) therefore came as something of a bolt from the blue.

HIGGINS has successfully used the analytical tools of deviance sociology to penetrate the deaf world and the interface between deaf and hearing people. It is a classic study of the ways an outsider group cope with imputations of stigma and stereotyping, in this instance by the construction and integration of a counter stigma ideology in the form of deaf communities.

His frame of reference thus lies squarely with the signing, or those he terms the "socially deaf", ie. those belonging to the deaf community proper. He examines the relationships they are able to adopt by virtue of this membership with those other deaf, the "audiometrically" or orally deaf, and the hearing world. He argues that the notion of strategy management in dealing with the problems of spoiled identity has been over-played. Energy is directed only to the routine management of interaction. The identity of the "socially deaf" as normal is secure by virtue of membership with this community. However this is not an argument which can be applied outside the protective framework of that community, as I have shown.

Nevertheless it is an exciting and polemical book. And the deaf community does provide a focal point for sociological analysis. Most importantly, the first tentative moves to broaden the implications of his analysis to other minority groups are made. BECKER's study of the elderly profoundly prelingually deaf appeared in the same year. It is an interesting excursion into the discipline of applied anthropology, although it can equally be read as a work of sociology. She suggests that the patterned adaptations to marginal status which the deaf develop fairly early on in life are instrumental in facilitating adaptation to a second 'disability' - that of old age. The importance of the values of interdependence, and the collective orientation of the signing deaf community is in sharp contrast to the individualistic, intensely competitive and socially mobile values of the normally hearing; the latter being, she argues, well suited to work achievement but less successful in coping with the lack of role structure which is characteristic of old age. She discusses the future of the deaf community, balancing its innate conservatism and (necessary)

pressures towards peer group conformity against the continuous threats to its extinction from the outside. Its survival, she argues, is dependent on its being respected as a source of transmission of the heritage of the deaf - via Sign Language. Yet, as I have intimated, it is precisely the status of sign language which is perceived to be under threat by the adoption of T.C. and S.E.E. (or more accurately, Signing Standard English). It is a question of fundamental importance. I would argue that the survival of minority cultures depends largely upon an ability to straddle both worlds - in this case the linguistic worlds of deaf and hearing. In this way cultural plurality can be maintained.

The ethnographic work of NASH and NASH (1981) is, inter alia, a further discursive analysis of the meaning structure of both signing and orally deaf people. It examines polemically varieties of linguistic usage amongst the deaf, and the patterns continuously being evolved in response to the constant denigration of the deaf community's language and status. It explores deaf/deaf as well as deaf/hearing interaction as "negotiated outcomes of framed meanings".

It also breaks new territory by contrasting middle and lower class consciousness with what the authors term 'deaf consciousness' along a series of parameters, such as linguistic style, and adherence to the individualistic pursuit of success. Overall it provides theoretical coherence to many previously fragmented and ill-understood facets of deaf/deaf experience. However, one searches in vain for a comprehensive description of where and how the authors obtained their fascinating insights. This, I contend, is as vital a part of the research exercise as the presentation of the data and arguments themselves. Nevertheless, it is a richly rewarding book, aimed primarily for the sociologist.*

The dawn of a new era in the analysis and interpretation of hearing impairment was the Sociology Conference held at Gallaudet College in 1982.

Of the many papers presented there, those of SEIDEL and ZAKAREWSKY gener-

* It was designated a work of reference at the RNID Library. However, the Librarian kindly let me have it out on loan as, she explained, "no one can understand it"!

ally followed the paths opened by HIGGINS and NASH and NASH. They concentrated on penetrating the meaning systems of the deaf, the patterns of interaction developed to cope with relations between a highly stigmatised group and a dominant hearing culture, and the forms of social organisation evolved in response to such "negation" (SEIDEL). ZAKAREWSKY interestingly dealt with the double burden of stigma suffered by deaf homosexuals, providing a fascinating insight into the conformity of the deaf community and its rejection of deviants within its midst.

Although it was "taken for granted" (BRIEN, 1982) that this would be a Conference focussing on the signing deaf community (ies) - WEINBERGER and RADELET excepted - and the venue could hardly have dictated otherwise, a heartening indication of scope for a broader analysis in the future was made in its conclusion: "If we look closely we will find more instructive similarities between the deaf and other outsiders"(HIGGINS and NASH). A new willingness and receptivity to penetrating the world of the non-

/contd. over

signing deaf who are not members of the inner circle of a deaf community is a much-needed breath of fresh air.

Thus the sociology of hearing impairment seems poised on the brink of exciting new developments. One crucial area where, to the best of my knowledge, a sociological analysis has been quite lacking, is that of employment. A discursive review of some of the vast body of existing literature will reveal, I hope, the contribution which sociology, as a discipline, has to offer. One reservation: I have been obliged to concentrate on the major contributors to the field, the very immensity of coverage presenting too formidable a task for total inclusiveness. Even so, this task has not been a light one.

Perhaps it is significant that most of the studies - particularly the earlier ones - have been American. I referred to their many limitations in Chapter 3: their almost exclusive pre-occupation with the prelingually deaf (variously defined); their instrumentality; the lack of standardised methods of data collection and analysis, and agreement on definitional terms, making comparisons otiose. This is not to commit the error of condemning 'descriptive' works out of hand. Description is often quite difficult. But description devoid of any theoretical underpinning to give coherence to what amounts to a vast body of facts and figures becomes impossible to interpret. Nevertheless, what these studies did achieve was to stimulate a degree of awareness of the disadvantaged position occupied by the deaf in the labour market in the United States. It was almost a decade later before a similar awareness could be demonstrated in the U.K.

2. AN HISTORICAL OVERVIEW

Historically, however, the employment prospects of the hearing impaired were not always conceived of in such terms, publicly at any rate. (The excellent and incisive review of the economic status of the deaf in the 19th century by MITCHELL, (1971) is a notable exception).

The EICHOLZ Report (1932), commissioned to investigate the position in industry of the hearing impaired and the facilities for their education,

concluded there was little support for the claim for special legislation to redress purported inequality. "At a time when as many as 75 per cent or more of deaf mute men are employed it cannot seriously be maintained that the attitudes of employers is definitely antagonistic to the deaf and dumb".

Any difficulties which the deaf were alleged to encounter were attributed variously to "mental weakness", "character defects", "an inability to control their elemental impulses", and, for women, "sexual instability". Generally, the "Unsatisfactory cases" brought to the attention of the Commission were attributed to "...a lack of development of the higher range of ideas through which ordinary men and women learn to govern their behaviour".

Nevertheless, the Report managed to draw attention to the importance of selecting 'appropriate' work for the deaf and, perhaps presaging later studies in the UK, the need for vocational training.

An excellent discussion of the role of the state, or rather state inaction, may be found in LYSONS (1973, 1980). However, it is worth noting that in a thesis devoted to an examination of the relationship between law and impairment, the omission of any discussion on the merits or otherwise of enforcing 'morality' is disappointing.

Both the TOMLINSON (1943) and PIERCY (1956) Committees considered the position of the deaf to be relatively unproblematic. The TOMLINSON Committee, for instance, commented: "'The deaf present a much more limited problem than the blind",

considering that most pupils of special schools for the deaf "...have already received manual and practical instruction which may assist them to obtain remunerative employment without further training ... and many of them compete successfully in the labour market ... In general, deafness is not a bar to employment save in certain [unspecified] occupations"

It concluded its deliberations on hearing impairment with the comment: "... and employed persons who become deaf later in life are able to remain in their present occupation".

For a Committee otherwise renowned for its liberal and humane orientation, its blindness as far as the deaf are concerned is difficult to explain.

An incisive, critical account of the accommodations and compromises actually made prior to its publication, and the 1944 Disabled Persons Act to

which it gave birth is to be found in BOLDEPERSON (1980).

The PIERCY Committee commented in a similarly optimistic manner: "rehabilitation of older persons .. does not call for special comment because deafness in itself is not normally a barrier to employment".

Continued legislative inertia reflects and reinforces this optimistic picture, allaying any sense of urgency and concern. The wording of the leaflet "Employing Someone Who is Deaf" (EMPLOYMENT SERVICES AGENCY) is quite reminiscent of EICHOLZ. It states briskly: "There is a wide field of possible employment opportunities which includes the professional, skilled, semi-skilled and unskilled jobs in industry .. In certain jobs, how badly or how well an employee can hear has little relevance, and in many noisy environments, a deaf person may be better able to concentrate than someone who is able to hear". (A qualification is inserted relating to sensitivity to noise suffered by some hearing impaired victims).

It continues in similar vein: "For the hard of hearing, inexpensive special amplifiers are available which can be attached to telephones without preventing their use by other people".

This blithely disregards both the widespread ignorance of their existence by many employers; and the more important fact that amplification is most effective for those suffering from conductive rather than sensori-neural deafness. Moreover, applications have to be channelled through the D.R.O. Both BIRD and TREVAINS (1978) and BEATTIE (1981) have drawn attention to the reluctance to apply for such aids for this reason. And even where application is made, their evidence suggest that employers are far from eager to install such equipment - borne out by the perceptions of some of my own respondents.

3. NOISE-INDUCED DEAFNESS

A similar pattern of inertia has characterised the area of industrial deafness. Occupational deafness has been fairly comprehensively covered in the literature (HINCHCLIFFE and HINCHCLIFFE, 1974; KERSE, 1975; HARRISON, 1978; BEATTIE, 1981), so I shall make only the briefest reference to it.

Cognisance of the detrimental effects of noise on hearing acuity occurred as early as the 2nd Century A.D. when PLINY wrote: " Nilus praecipitans se fragore auditum adcolis aufert " (in HARRISON, op.cit)

referring to the adverse effects of exposure to the noise

of the Nile cataracts. Centuries later, historians noted the prevalence of coppersmiths', blacksmiths' and boilermakers' deafness.

Incidence has been variously estimated: from the conservative figure of half a million workers at risk in manufacturing industry mentioned by the Factory Inspectorate (1971); to the more recent survey of the Institute of Sound and Vibration Research (Times, 15.6.1978) which argues that the numbers at risk could be as high as $1\frac{1}{2}$ million. A local study (TAYLOR, PEARSON et al, 1967) demonstrated in Dundee that "...there are about 18,000 people occupationally assailed by the noise of jute machinery".

The question arises as to why, in the absence of legislation, so few cases have come to court under common law provision. SELWYN (1973) and FAIERS (1978) comment on the difficulties of proving the link between occupational damage and hazards which might occur normally in the environment, its insidiousness of onset, and our general social attitudes towards deafness: "We all regard being hard of hearing as part of the growing-old process ... The average worker has a good risk appreciation of traumatic injury .. with noise-induced deafness, the risk appreciation level is very low and, in consequence, the seriousness of the problem is rarely accepted" (FAIERS, op. cit).

Thus, not only have few cases been brought. They have been notoriously hard to win. For a discussion of the cases, the reader is referred to SELWYN (op. cit) and KERSE (1975).

The story - as yet incomplete - of the dilatory nature of legislative intervention may be found in the Report of the Wilson Committee (1963), the report of BURNS and ROBINSON (1970); the Department of Employment Code of Practice (1972); and the permissive self-regulatory provisions contained in the Health and Safety at Work Act, (1974).

The only redress available lies in a claim for compensation under the Social Security Act 1975, when deafness was finally prescribed as an occupational disease. However, its aegis has been so limited, and the criteria for qualification so stringent, that the disparity between the number of claimants receiving benefit (some 4,500 as reported in Hearing, 1980)

and the estimated coverage by the Industrial Injuries Advisory Council Report (1978) of 150,000, requires no further comment.

We are left with a thoroughly unsatisfactory picture: of a fraction of employees at risk being 'eligible' to claim under Social Security regulations, whose stringency acts as a very real deterrent to application; alongside a virtually unworkable common law compensation system; with legislation where avoidance of liability is all too common. Not unexpectedly, political expediency has much to answer for: "Any future action must take into account the cost for industry as well as the benefit of reduced risk of hearing damage. If we were totally to remove any possible risk of industrial deafness, we would do away with, perhaps, hundreds of thousands of jobs .. We must ensure that a reasonable balance is maintained between costs and benefits" (HANSARD, 1980).

Finally, with the quota system set to run a further course despite the acknowledged inadequacy of its enforcement, public interest in the hearing impaired - as reflected in such statutory provision as exists - remains static. The question which is still left unanswered is why the statutory position is so resistant to change when the situation, as evidenced by the many studies I shall review, is so patently unsatisfactory.

4. A DEPRESSED ECONOMIC PICTURE

In 1980, the general picture was described thus by BENDERLY: "The system fails deaf workers not once but twice. They get less education than the hearing, and they don't get jobs that fully exploit the hearing they have .. Not accidentally, therefore, deaf workers tend to cluster in industries such as the manufacture of non-durable goods, and in trades such as printing and sewing, where they can get by with stereotyped, and thus reasonably predictable, oral communication. Only the rare employer truly accommodates the deaf worker".

I will look at the substantive issues raised by this and previous works under the following heads whereby problems have been identified: Unemployment, Underemployment and related issues such as lack of training, depressed skill levels, the restricted range of jobs available and lack of promotion prospects. A separate section will be devoted to such references as exist on communication patterns and problems of the hearing impaired at work. Finally, I shall look at the difficulties encountered in actually obtaining a job; the literature on attitudes of employers; and

predictions for the future.

5. UNEMPLOYMENT

It has been generally agreed that unemployment constitutes less of a problem for the profoundly hearing impaired than underemployment - although this judgement is very much subject to modification in the current recession. (And underemployment constitutes a form of unemployment).

It is almost impossible to estimate correctly the extent to which market fluctuations differentially affect certain groups in the population or to posit a direct causal relationship between hearing impairment and unemployment. It is generally accepted that age, lack of marketable skills (or possession of obsolete skills), lack of availability of work, and impairment are factors traditionally associated with greater risk of unemployment (SHOWLER and SINFIELD, 1981). The problem remains, for the hearing impaired, one of assessing their employability against a background of possible employer prejudice and ignorance, inadequacy of placement services, ignorance of career opportunities, and lack of adequate training.

Earlier studies in the United States generally confirmed, however, that the rate of unemployment of deaf adults tended to be higher than that of their hearing counterparts - although this is a finding disputed by DE CARO and BRIEN (1981). BOATNER, STUCKLESS and MOORE (1964) studied 177 juniors and 236 alumni of 9 North Eastern Schools for the Deaf and found an unemployment rate of 17% (calculated as a percentage over a 6 year period), as against a regional estimate of 4.1% for the general population in Connecticut. KRONENBERG and BLAKE's (1966) complementary study of 193 junior and senior students and 685 alumni of Schools for the Deaf in 7 Southern States estimated a 25% unemployment rate for deaf adult males in the South West (when the rate of unemployment nationally for a comparably aged population was 11.2%). The latter authors did recognise the problems in arriving at such figures due to the difficulties in assessing employability

and the desire and motivation for work. Diverse sample selection makes comparisons even of these two studies possibly misleading. I quote their findings to illustrate the gravity of the problem. CONNOR and ROSENSTEIN (1963) in their sample of 177 juniors and former students of New England Schools for the Deaf found 11% cited problems in obtaining work (although few reasons were given).

Despite the impossibility of comparing data, the indications are that the deaf are differentially penalised, even compared with other impaired groups. As QUIGLEY (in KRONENBERG and BLAKE, op.cit) comments of the implications for employment of the deaf which emerged from these earlier studies:
"Improvement in the outlook for the disabled in general has not applied equally to the deaf ... Our modalities of rehabilitation of the deaf have simply not reached the level of effectiveness as with the hearing disabled".

Much the most comprehensive and reliable data in the US relating, inter alia, to unemployment, has been collected as part of a National Census of the Deaf Population by SCHEIN and DELK (1974) - the first census of the deaf to be conducted there since the Bureau of Census Study in 1930. Using a definition related to the age of onset of hearing loss,^{*} its authors found that less than 3% of deaf white males were unemployed in 1972, comparing favourably with the national unemployment rate for all males at that time (4.9%); but that deaf women and non-white deaf males suffered markedly worse, the latter having an unemployment rate "nearly five times that of white deaf males".

Even these figures are likely to underrepresent the problem. Certain minorities within the deaf minority, and social isolates outside the deaf network were excluded (BENDERLY, op.cit). The authors were, nonetheless, concerned lest an unnecessarily gloomy picture should emerge, and emphasised "...the obverse side of the coin": namely "The overwhelming majority of the prevocationally^{*} deaf sample is employed".

However, the later work of SCHEIN (1978), reflecting international trends suggested by REICH's (1974) sample of 162 alumni of Canadian special
* This is defined as "those persons who could not hear and understand speech and who had lost (or never had) that ability prior to 19 years of age".

schools for the deaf, presents a far more disturbing picture. His results show: "Labour force participation by deaf people has declined from 65.5 per cent in 1972 to 61.3 per cent in 1977 .. Males dropped from 80.3 to 74.8 percent. Females from 50.0 to 47.2 percent. These declines are contrary to national trends".

Although unemployment increased nationally during this period, SCHEIN maintains "Deaf males suffered most, with an increase from 5.4 to 10.2 percent". Even these figures are regarded as underestimating the true extent of the problem, as his sample respondents had a higher average educational achievement and income than non-respondents.

Other individual studies have added further dimensions to the picture. A particularly sensitive study of unemployment carried out a decade prior to the research of SCHEIN and DELK by ADLER (1963) suggested that unemployment amongst the deaf was essentially a young man's problem - a factor borne out by REICH (op.cit). ADLER commented "The reasons for unemployment among deaf men are as numerous and diverse as with normal hearing men; and although not all can be attributed to the handicap of deafness alone, deafness is, nevertheless, an uncompromising employment control factor that creates problems a hearing man never experiences".

The average length of time her admittedly small and severely impaired sample were unemployed was 4 years in 5, ie. 80% of their careers. A similar study conducted today would doubtless lead to similar findings amongst older men.

English studies tended to emerge somewhat later (pace those of CLARK and CROWDEN, 1939; and DREWRY, 1958), and to focus on the personal, social and vocational adjustment of deaf school leavers (MONTGOMERY, 1967; RODDA, 1970; the BRITISH DEAF ASSOCIATION, 1974; STORER, 1975 - to mention a few).

They are primarily status studies which examine the conditions of the deaf in a hearing work environment. Although to some extent they suffer from similar defects of over-simplification and over-generalisation as their American counterparts, they are less purely descriptive and instrumental. Attempts are made to locate problems within a broader explanatory context, particularly that of oppressive educational philosophies. Again, con-

centration has focussed largely on the 'prelingually' deaf, until latterly.

In line with the work of CONNOR and ROSENSTEIN (op. cit) some studies have concentrated less on attempting to measure actual unemployment, than on the difficulties encountered in obtaining work - in my view a progressive step, considering the problems involved. RODDA's rigorous study found that those attending special schools, for example, were not only less likely to take up part-time employment, but "the number obtaining such jobs also decreases with increased loss of hearing for speech and for pure tones".

Low vocational aspirations - and concomitant lack of employment, or under-employment (itself a form of unemployment) - have been related to the generally low expectations of teachers in special schools, and the lack of deaf teachers to act as role models (MONTGOMERY, 1967).

STORER's (1975) study has produced not dissimilar results to those of his American contemporaries. Although his sample was small (49 subjects) and confined geographically to the West Midlands, he found that the proportion of his respondents who had experienced, or were experiencing unemployment at the time of interview was "high" (16% of his sample).

As indicated earlier, attention has just recently begun to focus on the employment difficulties of those with acquired deafness, an hitherto neglected group. One might anticipate that unemployment would be less of a problem than drops in occupational status as hearing deteriorated, apart from those adventitiously deafened who may be unable to continue in a post requiring high levels of communication.

The highly sophisticated, quantitative study of THOMAS and HERBST (1980) of a large sample of 211 hearing impaired subjects who had been issued with a hearing aid for the first time between 1970 and 1976 found that "the hearing impaired are neither more nor less likely to be at work than the normally hearing".

Other studies, such as those of ANNAND (1974, 1975(a), 1975 (b), BIRD and TREVAINS, 1978, BEATTIE, 1981, TREVAINS, 1982) have followed the pattern

indicated earlier and focussed more on the difficulties associated with obtaining employment for those with acquired loss. Perceptions of unemployment were clearly important in BIRD and TREVAINS' methodologically neat, but small pilot study. They concluded of their subjects: "Although their handicap did not have any effect on recruitment prospects when applying for their present post, many believed it would if they were to apply for new jobs".

TREVAINS' (1982) study of 95 respondents recruited from audiology clinics, voluntary agencies and personal contacts, noted that 32:66 respondents who had looked for a job since the onset of their hearing loss reported having difficulties, particularly at the application form/interview stage, where unpredictability is high and problems of disclosure/non-disclosure at their most acute. She concludes: "Comparison between the accounts of current employers' attitudes and prospective employers' attitudes suggests that the partially hearing are particularly vulnerable when seeking 'new jobs'".

Finally BEATTIE's (1981) study of 96 respondents found actual unemployment to be minimal. As with earlier UK studies, on the prelingually deaf, no direct causal link between personal/social, communication and technical skills with occupational adjustment was postulated. She found, however, that her subjects themselves did not relate her more general questions she asked to the work situation. But, as she comments: "... problems and difficulties were brought home, not within their families and in their leisure activities but at work".

Employment was a situation which exacerbated feelings of inadequacy and failure.

Although much more conscious of the social context of hearing loss and of the perceptions of their respondents, these UK studies still remain located largely within an operational, instrumental framework, more appropriate to the field of social administration than the achievement of a broader sociological understanding.

Some indication of the increasing extent of the problem of unemployment for the hearing impaired may be given by reference to figures released by the Manpower Services Commission of the numbers of registered unemployed.

However,, the figures must be interpreted with extreme caution. The M.S.C. uses a similar typology to that of the Department of Health and Social Security, viz. "Deaf without speech", "Deaf with speech" and "Hard of Hearing". No explanation is given to determine by what specific criteria the hearing impaired are assigned to one or other category. Moreover, the figures may safely be assumed to grossly under-estimate the extent of the problem, in view of the widely acknowledged reluctance to be registered (GREAVES and MASSIE, 1977; KETTLE, 1977: JORDAN, 1979). As a base-line, however, they indicate the gravity of the problem.

The data is further complicated as figures for "the hard of hearing" were not made available to me for the years 1970-1978, but underlying trends may be discerned.

<u>YEAR</u>	<u>REGISTERED DEAF UNEMPLD. (ADULTS)</u>	<u>ALL R.D.F.s UNEMPLOYED</u>	<u>TOTAL UNEMPLOYED</u>
1970	878	72,116	606,017
1971	927	80,172	722,270
1972	1,096	91,063	929,214
1973	889	77,360	661,197
1974	731	63,375	646,800
1975	860	65,369	899,700
1976	1,098	75,857	1,231,218
1977	1,185	75,248	1,335,635
1978	1,187	70,765	1,387,484
1979	1,006)	63,600	1,279,808
1980	1,115)	77,933	1,454,662
1981	1,658)	100,440	2,426,271
1982	1,872)	113,889	2,895,871

(The figures for 1979- 82 are arrived at by adding figures for the "hard of hearing" to those for "Deaf with speech" and "Deaf without speech", bringing the total number of registered hearing impaired unemployed people for these years to:

	<u>Reg. ("Hard of hearing")</u>	<u>Total Registered Deaf Unempld.</u>
		1,982
1979	976	
1980	1,062	" 2,177
1981	1,358	" 3,016
1982	1,453	" 3,325

The upward trend for those classified as "Deaf with and without speech" is not unexpected in view of the general economic recession. What is, perhaps, surprising is a similarly high figure for those classified These figures are reproduced with the kind permission of the Manpower Services Commission

as "hard of hearing", given the contention that few in this group register (BEATTIE, op.cit). An explanation may lie in BLAXTER's suggestion (in BEATTIE) that in times of economic recession, the lightly and very severely impaired have most problems in getting a job - an interesting paradox, but one which is worth bearing in mind.

Reviewing the employment status of all hearing impaired people, the more recent literature thus presents the problem of job acquisition as an area of increasing concern, particularly for the prelingually deaf. For those with acquired hearing loss, the difficulties involved in interview management seem to serve as a very effective deterrent to job change. The implications of this in creating an occupationally immobile, inflexible and docile labour force are not just confined to the hearing impaired. They also affect the 'able-bodied' labour force. But the prospect of being forced, or wishing, to enter the competitive struggle for a diminishing number of jobs - from the evidence of these studies - seems to hit the hearing impaired population disproportionately hard.

6. UNDEREMPLOYMENT

This has been considered a far more emotive issue. SORRENTINO (1981)

comments: "Unemployment is only one measure of under-utilization of the labour force. Under-utilization may also take the form of under-employment - such as persons in the labour force who work part-time .. or persons who must work beneath their skill or educational level".

As noted, the political implications of underemployment are far more "acceptable" than are those of unemployment (MONTGOMERY, J., 1978).

However, the whole area bristles with definitional problems: How does one measure underemployment? How far is underemployment attributable to deafness per se, rather than the lack of qualifications (which may, or may not be due to hearing impairment), age, or a host of other factors.

THOMAS et al.(1982) found that their follow-up study on those with severe acquired hearing loss was unable to shed any light upon the problem of underemployment, precisely because of such definitional problems. They

comment: "We found it almost impossible to disentangle the numerous factors involved. For example, people can be in a job with inferior status because (a) it was genuinely impossible to continue in the favoured job because of hearing loss, (b) they did not have the ability to continue in the favoured job irrespective of hearing loss, or (c) because they had suffered unfair discrimination on the basis of hearing loss".

Nevertheless, together with the lack of promotion prospects, it is the problem most frequently identified in the literature as affecting the hearing impaired. Its definitional ambiguities seem to have been largely ignored (STAHLER, 1969; WILLIAMS and SUSSMAN, 1971). Thus STAHLER could write: "The basic question is how to get the deaf into jobs that are compatible with their aptitudes, their intelligence, their abilities and their real interests".

He goes on to argue that the deaf are generally quickly absorbed into the labour market, but often at a level well below their capabilities. "They quickly reach a plateau and there they remain". The result is "underemployment is so prevalent as to become a major problem for most deaf people who are capable of and interested in working".

And BOYCE WILLIAMS (1981)* could still argue that it is a non-problematic concept. Otherwise, only SCHEIN and DELK (1974) have shown some appreciation of the complexities involved. Whilst acknowledging its inadequacies as a single criterion, they used educational attainment as a "gross indication". They found "almost 43 percent of deaf adults who have completed 13 years or more of school .. have principal occupations in the following categories: clerical, transit and nontransit operatives, farm and non-farm laborers, and service and household workers. Underemployment certainly describes many of these job placements, though not necessarily all".

Cause and effect, outcome and manifestation are so closely interwoven that it would strain the argument to attempt to group the factors related to underemployment in any systematic fashion. I have, therefore, simply dealt with the issues as they have emerged in the literature under the following heads: the insufficiency of training and re-training opportunities; the low level of skill at which many deaf people operate; job dissatisfaction and the disparity between aspirations, expectations and achievements; the restricted range of jobs for which the hearing impaired are considered 'suitable' and the possible role of professionals in creating such a climate; low occupational mobility; and lack of promotion prospects.

* Visit to Department of Health, Education and Welfare, Washington D.C., March 1981

(a) Insufficient Training and Re-training Opportunities

BOATNER et al (op.cit) point to a substantial body of evidence derived from a list of 'vocations' taught in residential schools for the deaf, and argue that "...in spite of all the training resources of the school /the deaf/ appear to be placed in relatively unremunerative and unchallenging occupations".

The unexceptional range of training given - from agriculture, barbering, leatherwork, masonry, printing, painting and decorating, sign painting and clock repairing is not such as to inspire confidence in deaf potential.

"It is obvious" BOATNER concludes "that these have limited vocational application".

Similar conclusions were drawn by LUNDE and BIGMAN's (1959) study of 10,000 deaf respondents, and from KRONENBERG AND BLAKE's work.

It is patently a situation which has not materially altered since the 1930's when CLARK and CROWDEN (1939) compiled a list of occupations in which most deaf people were commonly employed - the inference being that vocational training duly bore fruit. The trades, with one or two exceptions, are more or less identical. Only very modest expansion of training in such areas as computing or word processing have taken place even since the 1960's.

The stereotypic image of what 'the deaf' are considered to be capable of doing would appear to underlie the whole philosophy of such training programmes as are available. This is a theme developed by MONTGOMERY (1967, 1978) and RODDA (1972), and noted by BENDERLY (op.cit). The almost universal conclusion for the need to extend vocational training has barely materialised. Although, as RODDA points out, efforts are being made in the UK at schools such as Oak Lodge, Donaldsons, Nuffield Priory and Burwood Park (as my visits to the former two have confirmed), these are but the tip of the iceberg.

The problem, moreover, has been described as training for what? As SILVERMAN (in KRONENBERG and BLAKE) argues: "Educators are faced with the

perplexing problem of preparing young people for jobs that at the time of their schooling do not yet exist".

A prescient remark for 1964, but hardly an insuperable problem. The emphasis is, above all, on training for flexibility.

It is to more recent works (PHILLIPS, 1975 (a) and (b) that an indication may be found of the self-perpetuating nature of the process. He comments: "Because of the ease in training the deaf worker for routine jobs, they may continue to be unduly restricted to jobs where the training is readily and easily accomplished".

(b) Reduced Skill Levels

Integrally related to the body of evidence on restricted training opportunities, particularly within special schools for the deaf, and post-schooling levels, especially in the UK (MONTGOMERY, 1967), is the reduced level of skill at which deaf people tend to be employed. As MONTGOMERY (1967) notes "...the majority of those whose abilities are underemployed belong to the partly and wholly unskilled group".

BOATNER et al. found that 71% of their sample were to be found amongst the semi-skilled and unskilled occupations, suggesting that "...the proportion of young deaf males in semi-skilled and unskilled positions is double that of the national proportion, and substantially higher also among deaf females than among the generally employed female population".

KRONENBERG and BLAKE's complementary study found 61% of their sample to be similarly located "amongst the lower ranked occupations".

These are comments which echo throughout both the American and British literature: "A heavy concentration in skilled and semi-skilled occupations" (LUNDE and BIGMAN);

"Industrial opportunities are greatest for deaf men who are engaged in semi-skilled and unskilled work" (DREWRY, 1958);

the tendency of the deaf to work at "rather routine trades, involving more or less repetitive work" (FURFEY and HARTE, 1964);

"... a preponderance of respondents are employed in semi-skilled and unskilled jobs" (STORER, 1975).

Few, if any, respondents in these studies occupied professional,

technical or sales positions, and BOATNER et al. concluded they were unlikely to do so. This is a finding supported by OLOMAN (1963, in MONTGOMERY, 1967) who has commented on: " ..the pitifully small number of placements in the professions ".

There is no reason to suppose, however, that given training and support, the hearing impaired are not capable of achieving much higher levels of skill (SCHEIN, 1968; SCHEIN and DELK, op.cit; CRAMMATTE, 1968).

The question which must be borne in mind is the imponderable one: the level of employability at higher levels of skill. FURFEY and HARTE (op.cit), for example, find the concentration of deaf employees at the lower end of the skill spectrum " ..understandable .. if a job involves flexibility, it also involves the need to understand instructions".

However, to the best of my knowledge, no attempt has been made to investigate the potential employability of the deaf given the assistance of aid(e)s now statutorily available in the United States. The relative success of Gallaudet alumni in broadening the scope and upgrading the skill level of jobs the deaf are deemed capable of attests, in my view, to the role of social and work skill training and work experience. And BENDERLY (op.cit) suggests, presciently for my argument, that the success of what she terms "a small group of prosperous exceptions" is determined crucially by "their ability to mediate between the two cultures" (ie. to handle both manual and 'standard' oral communication skills). This has not been an issue dealt with by writers in the employment field.

(c) Job Satisfaction/Dissatisfaction

Much of the thrust of research enquiry on employment has focussed on the extent to which the hearing impaired are seen to be satisfied or dissatisfied with their work. However, as noted by several authors (WILENSKY, 1967; BIRD and TREVAINS, op.cit.; TREVAINS, op.cit), it is notoriously hard to measure such a concept and to abstract data which is meaningful over a wide range of occupations. "Satisfaction with work has to be con-

sidered in relation to individual attitudes, and the extent to which work gratifies individual needs" (TREVAINS, 1982).

However, as with the overall problem of underemployment, the complexities of the issue have largely been ignored in the literature, which explains much of the inconsistency in the findings.

BOATNER et al. found that although most of their subjects reported they were satisfied with their present job "... most, in fact, aspire to jobs requiring greater skill".

KRONENBERG and BLAKE's study indicated that whilst similar frustrations existed, the discrepancy between aspirations and achievements was less marked, particularly amongst women, and that "... most deaf employees were well satisfied with their present employment".

It would indicate that women are doubly disadvantaged: by their impairment and by their sex. Thus equivalence of aspirations and achievements - at a low level - might not be uncommon. A disinclination to aspire to "unusual" occupations was also manifest, with a corresponding tendency to favour the traditional occupations followed by the deaf. Aspirations appeared to be firmly related to training courses given at schools for the deaf, and jobs deaf respondents knew other deaf people had filled in the past.

A slight variation occurred amongst ROSENSTEIN and LERMAN's (1963) sample of 177 ex-pupils of Lexington School for the Deaf, in that job dissatisfaction was greatest amongst the skilled and the un-skilled. The semi-skilled appeared relatively content with their lot.

Some explanation for this phenomenon may, perhaps, be seen in the much more prescient analyses of BIRD and TREVAINS, and TREVAINS of those with acquired hearing loss. Their findings were contrary to fairly well established trends amongst the hearing population, where levels of job satisfaction are highest amongst professional and technical staff, and lowest amongst clerical workers. A much smaller proportion of hearing impaired employees of professional and managerial status felt satisfied with their positions, compared with a much larger proportion of those in

skilled or unskilled work. They speculate that those in higher positions are liable to experience greater frustrations in fulfilling their expectations of work. Those on the lower echelons of the career ladder tend to be more grateful - and correspondingly more satisfied - because they have a job at all. In other words, impairment very successfully depresses expectations. What is ignored in this part of their analysis, however, is any discussion of the possibility that it is the way impairment is evaluated in our society which might lead to such a chain of reactions, rather than simply focussing, by implication, on an individual pathology model of impairment.

It must be borne in mind that the above conjectures were made of those with acquired deafness. For the 'prelingually' deaf, UK evidence, although over-simplified, is not, however, dissimilar. Although gender differences emerged from the NATIONAL ASSOCIATION OF THE DEAF's Irish Study (1970), in that men tended to have a more favourable attitude towards their employment than women, possibly the time gap between this study and that of KRONENBERG and BLAKE has allowed women, even in Ireland, to raise their aspirations slightly? Boredom and dirt were among the chief reasons mentioned as 'dissatisfiers'.

Boredom is a recurrent theme, as evidenced by STORER. The sheer repetitiveness of some jobs was responsible largely for the levels of job dissatisfaction (in 58% of jobs held) found in his sample. And DREWRY's earlier study had indicated "... an indifference and lack of enthusiasm is shown by a number of deaf adolescents about their jobs".

This is in line with 'normal' hearing expectations: that those with low skill and status levels would feel most discontented.

In the 3 other major studies of those with acquired hearing loss, findings revealed an increased appreciation of the complexities of the question. THOMAS and HERBST found generally that "...the hearing impaired were significantly less happy at work than the normally hearing; /and/ although not an economic problem insofar as it does not seem to cause unemployment, deafness seems to lower the quality of work-

ing life. It is this sense of personal unhappiness, without major crises, that typifies the pervasive effects of acquired deafness".

And TREVAINS, in her latest work (1982) concluded: "Hearing loss often appeared to have a major part to play in determining the level of job satisfaction - sometimes in surprising ways .. the ability to retain a job, and in some cases to hide one's hearing loss, were goals in themselves, and fulfilment of them enough to guarantee job satisfaction".

It is a plausible hypothesis.

Generally, however, I suggest the usefulness of trying to achieve a measure of job-satisfaction has been over-rated. It is likely that most employees are extremely selective in rating their overall job satisfaction (or lack of it), and reluctant to give contrary amplificatory detail where this would appear to detract from the credibility of their initial response. Or conceivably, partial answers may be a function of anxiety, lest 'grumbles' might leak back to their employers, whatever the reassurances about confidentiality. WILENSKY's (1967) more plausible suggestion - that to admit to a dislike of one's work is tantamount to an admission of personal failure, given that the work one does is an indispensable part of the way society evaluates one as a person - has not found its way into the corpus of 'knowledge' about the hearing impaired.

(d) The Range of Jobs - and the Role of Professionals

It is difficult to ascertain whether or not the professions concerned with the provision of information and guidance about careers - principally teachers, careers officers, DROs, and social workers for the deaf - have 'realistic' expectations about their clientele, or whether they are as much victims of the generally held cultural stereotypes about the deaf person's 'incompetence' as many hearing people; the result being that job placement tends to become routinised at the lowest common denominator. The few indications from the literature tend to support the latter contention. If this is so, it constitutes a particularly pernicious manifestation of underemployment, but one whose implications have remained largely unexplored.

There is some historical evidence which gives credence to such a stance, (MITCHELL, S., 1971) She quotes the advice given to the deaf by one, Samuel Porter (in American Annals of the Deaf, July 1858). He cautioned the deaf " .. from seeking to intrude themselves into situations for which they are naturally unfitted ... the deaf man will do well to submit as gracefully as he can, and with a quiet resignation, to the will of Providence; .. thankfully availing himself of such compensations in his power ".

Generally, in her incisive analysis of the economic status of the deaf in the 19th century, she comments "deaf adults were told to keep their sights low and to accept the subordinate role prepared for them".

To the extent that the old values are perpetuated in today's currency of thought comes from statements made, for example by RODDA (in MONTGOMERY, 1967): " You are told so often that the best job for you is a typist that eventually you believe this ".

On the other side of the Atlantic, an attitude of benevolent paternalism was suggested by CONNOR and ROSENSTEIN (op.cit), whose hearing impaired graduates from Lexington, despite their ability, gravitated into jobs which were considered to place little demand on their capabilities. The authors suggest that the deaf are taught to want to work for employers rather than run their own businesses, or do 'creative' work. At most, they are taught "...to attain a saleable skill at a semi-technical or skilled level".

KRONENBERG and BLAKE have commented, too, that "It is apparent that many individuals and agencies are content to 'just get a job' for the deaf",

thus ensuring that the deaf operate at the lower end of the skill market.

It is indeed open to speculation how far any choice is in fact pre-empted by the lack of occupational information traditionally given by placement officers, stereotypic images by professional careers advisers as to what 'the deaf' are capable of; "the prevailing social norms which surround the hearing impaired" (RODDA, op.cit); or, as MONTGOMERY additionally suggests, the well-established preference of the profoundly prelingually deaf for "...the concrete, short-term reward rather than the more abstract or distant reward" (1967).

(Even this latter is a socially conditioned response, and not necessarily

part of the 'psychic apparatus' of the deaf).

Evidence from the literature of the restricted range of job opportunities is almost unequivocal. It was commented on as early as 1958 by

DREWRY as particularly affecting the more able deaf: "... there is not much encouragement for the deaf to enter other avenues of employment than the traditional crafts like boot repairing and joinery in which the initial experience was sometimes gained in the handicraft classes at school".

And LERMAN and GUILFOYLE (1970) argue of the British scene: "... at all ages deaf subjects choose jobs at lower socio-economic levels than do their hearing siblings, and that they tend to cluster at the semi-skilled and unskilled levels".

Nearly 20 years after the early work of DREWRY, STORER indicated that in the Wolverhampton area where he conducted his survey, the range of jobs was virtually unlimited "... but the hearing impaired and their immediate relatives appeared to have but rudimentary knowledge of the possibilities".

It is in this area that any approximation to an understanding of the potentially damaging effects of professionals as official labellers or agents of social control emerges in the literature. One is tantalisingly beckoned by the rich possibilities for exploration and analysis, only to be rebuffed as the issue is shelved. Thus RODDA (op.cit) contends that schools bear a heavy responsibility in presenting possibly restricted careers information and advice to their charges. He comments with some surprise at "...the persistency with which the beliefs about the mental inferiority of the deaf and hearing-impaired continue to be held even by professionals". (my italics.)

The issue, however, was evidently too hot to handle. The argument is not pursued.

Yet Judy DODD (1977) in a frustratingly brief article attests to the pervasive influence of stereotypic notions about what the deaf can and cannot - or should not - do. She argues persuasively that deaf workers are so often found in low-paid, low-status, dead-end jobs precisely because of the effects of "self-selection and aspiration on traditional stereotyped notions of what deaf men and deaf women can do".

Deafness, like gender, is regarded by society as a handicap to holding

certain jobs.

Nevertheless, MONTGOMERY (1967, 1978, 1981) has been one of the most outspoken and polemical writers on the subject. He contends, for instance, that "... under the paternal cloak of the disablement register .. many accept work for which they are not particularly suited .. under the conviction that any job is better than none".

Very pertinently, he questions the lack of deaf teachers in deaf schools, an obvious but untapped resource, which could provide very effective role models for pupils. Nothing more eloquently testifies to the double standards of oralist teachers of the deaf. As MONTGOMERY has argued, whilst the impression is given that pupils are generally thought of quite highly as pupils, this regard does not extend into the world of work, where they tend to be relegated to inferior economic status. The implications could hardly be more stark: if their orally taught deaf proteges are considered to be such a success, why the reluctance to employ them as teachers?

Unfortunately, the exhilarating possibilities opened up by DODD and MONTGOMERY for further research and exploration have, to the best of my knowledge, remained untapped. I can only refer the reader to my arguments at the beginning of this chapter regarding possible reasons for the lack of exploration of such a rich source of ideas.

The more recent studies of PHILLIPS (op.cit), and DE CARO, EVANS and DOWALIBY (1980) continue the fact and figure orientation towards the issue of restricted job opportunities.

PHILLIPS cited 515 "specific and distinct" career openings for the deaf, including, significantly, professional, technical and managerial posts. But opportunities actually available, he found, were far more likely to occur in work oriented towards data and things rather than people. The inherent weakness of such data, however, will readily be apparent. A questionnaire-type approach, sampling respectively 128 firms and businesses, 125 trade associations and 26 institutions of higher education

however comprehensively surveyed, suffers from the defects of all attitude surveys mentioned at the beginning of this Review. The fact that his data revealed many negative attitudes simply highlights the real gravity of the problem.

DE CARO et al (op.cit) assessed the attitudes regarding advising similarly qualified deaf and hearing persons training for 14 different occupations and found "significant differences in the expressed advice to hearing and deaf persons",

(although the attitudes of these significant others apparently showed no difference). The authors are careful to point out that whilst there are occupations which the deaf could not reasonably train for at the moment, there was no way of establishing whether they could train for such jobs, given the structure of the British school system.

Thus, if a diverse range of jobs for the deaf exists and is identified as being suitable for the hearing impaired, why is it not being exploited? This is a question which begs for some systematic analysis - as yet unaddressed in the literature beyond the assertions quoted above, precisely because, I suggest, the theoretical apparatus with which to undertake such a study has not been perceived as 'relevant'.

Another factor integrally related to the previous variables identified is that of

(e) Low Occupational Mobility

Carol REICH (1974), for example, has commented that, compared to the hearing population, her deaf sample remained relatively stationary (as analysed by movement from first to current job). "One would expect some movement", she notes.

This is a factor mentioned by most of the authors cited to date. CRAMMATTE's (op.cit) study of 100 "profoundly or severely deaf" professionals also pointed to the "occupational stability" of his sample, but this

is perhaps more in keeping with expectations. Being already trained to do professional tasks, they are less likely to be mobile between jobs than other groups.

However, for occupational groups in skilled, semi-skilled and unskilled trades, the evidence of low occupational mobility of deaf employees is profoundly disturbing, when flexibility and change are essential prerequisites for adaptation to a rapidly changing work environment. The inferences to be drawn are:

- (a) That the hearing impaired are content and satisfied with their job prospects. I have suggested that although some of the literature does indicate a degree of contentment, the over-simplified approach traditionally adopted masks other underlying problems.
- (b) It is indicative of a docile labour force too afraid of risking unemployment by moving.
- (c) It reflects the lack of appropriate training and re-training opportunities.
- (d) Conversely, greater mobility might indicate an inability to hold down a job.

The literature largely fails to draw out such implications, apart from the comments of GELLMAN (1965) and STORER (op.cit). As a manifestation of underemployment, I agree with STORER that it is a particularly unhealthy sign. It is significant that it was his Hearing Class I subjects (ie. those least impaired) who exhibited the least 'stable' occupational behaviour; whilst those most severely impaired were most 'stable'. This is not, however, a finding altogether consistent with the indications revealed by the more in-depth questioning of my research.

For those with acquired hearing loss, little mention has been made of this issue. BEATTIE (op.cit) simply comments that it is probable that many of her sample are likely to have stayed in the same job for many years "as a result of hearing loss". (The connection is not quite so dir-

ect). It might be argued for both groups that, as with skill level and job satisfaction, location at either extreme of the severity continuum could equally militate against occupational change.

GELLMAN (op.cit) had the prescience to see, even in 1965, that "economic security will be predicated upon the ability to change occupations and to use continuing education to acquire techniques and abstract conceptions necessary for adapting to a more complex and variable occupational mode".

The occupational immobility of the deaf, particularly those educated in special schools, is reflected in their socio-cultural immobility. "To be changeable is to become insecure"

GELLMAN comments. Insecurity - and change - are often viewed negatively by the highly protective institutions for the deaf. Yet change is vital to the economic survival of the hearing impaired.

(f) Promotion Prospects

The evidence from the literature on the lack of promotion prospects appears to confirm the depressed occupational status of many deaf employees. But it does not answer with any degree of reliability whether denial of promotion is due to deafness per se. Earlier studies simply assumed that it was. The frequency with which the hearing impaired are documented as being passed over for promotion is, however, very suggestive. It is something which is commented on with almost unanimous agreement in the literature, particularly with regard to the prelingually deaf.

The need to distinguish between promotion which involves a shift to another agency; and "career ladder promotion" within the same agency (SCHEIN, DELK, and HOOKER, 1980) is not one recognised by earlier writers. Yet it is an important distinction, involving both "the traditional barrier to supervisory posts" and "the lack of awareness of career ladders and advancement of posts outside of the agency" (SCHEIN et.al, 1980).

Both critically involve communication skills - particularly the ability to be kept in touch with what is going on. In their study, SCHEIN et al. found that of 4 non-promoted workers in their present job, 3 had been there only a short while; whilst 5 other deaf workers reported at least one career ladder promotion. Thus the position is possibly shifting marginally,

now. Reference to earlier studies indicates a bleaker picture.

KRONENBERG and BLAKE commented: "Even with additional training, vocational opportunities under the same employer remain limited or negligible for many employees" -

a conclusion shared by BOATNER et al's complementary study. And DREWRY's UK study had concluded: "Most male adolescents rate their promotion prospects low".

He found that most firms he approached were reluctant to take on bright deaf youngsters in the higher range of occupations.

CONNOR and ROSENSTEIN (op.cit) point to a lack of confidence the hearing impaired suffer, where self-confidence is "inherent in moving upwards in job situations"

- a theme which is highlighted by the much later findings of BIRD and TREVAINS. A life-time's experience of negative evaluations of one's capabilities is hardly conducive to the development of heightened self-esteem. Carol REICH (op.cit) found only 3% of her sample in a supervisory position, "providing further indication of the limited opportunities that the deaf enjoy for advancement".

Dissatisfaction with chances for promotion was a factor identified as early as 1958 in LUNDE and BIGMAN's study. More recently, a study carried out by BOWE, DELK and SCHEIN (1973), investigating allegations of discrimination on this score, found 174 deaf subjects claimed to have suffered discrimination by their employers, 105 involving Federal agencies. Of complaints identified, lack of promotion prospects figured prominently in the experiences of blue-collar workers. The authors comment: "Typically, these persons were informed that they could not be promoted because 'deaf people cannot handle jobs requiring verbal contact'". Of white-collar Federal employees, 7:19 complained of being passed over for promotion.

Strangely, it was not a factor dealt with other than fairly perfunctorily in SCHEIN and DELK's N.C.D.P. study (1974). Reference was made briefly to the fact that there were some deaf doctors, lawyers and dentists. "That there are even a few successful deaf persons in these professions

demonstrates that such employment is feasible"

was the only comment made.

Feasible perhaps. But does it often materialise? Evidence from PHILLIPS' survey (op.cit) suggests that "...communication problems with other workers were often cited as the basic reasons for non promotion to supervisory or managerial positions".

And even for those "rare achievers", CRAMMATTE (op.cit) noted that further promotion for the deaf professional is often blocked by communication difficulties, The fact that, to the best of my knowledge, this is the only study of professional employment of the deaf in the literature is, in itself, significant. However, what is so critically absent is any assessment of the way in which 'communication difficulties' are evaluated by those in a position to offer promotion. The implicit assumption here, as with other studies, is that communication difficulties simply present practical obstacles to the achievement of such economic goals. The taken-for-granted nature of this assumption is rarely questioned.

CRAMMATTE comments for example: "deaf professional workers are anomalous because they are handicapped in communication but yet are making their careers in occupations which require more than a little communication, dealing as they do with ideas and people rather than with tools and raw materials only".

He notes that a fair proportion of even this "privileged" group are employed giving services to the deaf - "laudable occupations but not particularly challenging in a professional sense",

as he comments with some acerbity. But the analysis does not extend beyond this.

Promotion within the firm for this group of deaf workers was very much a function of tenure of service .."all but two of the nineteen respondents with administrative responsibilities had served ten or more years with one firm".

Of the 24 respondents whose service had exceeded 20 years, 12 had been given administrative responsibility. Not that devotion to a single employer always paid off. However, CRAMMATTE concluded that deaf employees generally fared better as regards further promotion if they remained within the same firm.

(Interestingly, by way of digression, one small piece of mythology concerning the limited, if not minimal linguistic skills and hence 'automatic' disqualification from economic participation is dispelled in CRAMMATTE's study, vide the large number of deaf born and early deafened subjects who appeared in the professional group he investigated. Were they all those "rare oral successes" of CONRAD (op.cit) one is tempted to ask? It is also a 'discrepancy' intriguingly mentioned, and tantalisingly left unexplored by SCHEIN and DELK (1974) who found that "born-deaf workers held proportionally more higher-grade jobs than those who lost their hearing after birth but before age 3").

For those with acquired deafness, one would anticipate that obstacles to advancement might constitute the most intractable problem of all: for those already in professional positions, retaining them in the face of possibly deteriorating hearing; for those yet to ascend the scale, finding the paths to advancement blocked.

However, HERBST and THOMAS (op.cit) conclude, somewhat surprisingly: ". . . Nor is there any evidence to suggest that the hearing impaired feel that their prospects of promotion or change differ significantly from those of the normally hearing".

As details are not available at the time of writing to assess how such a conclusion was arrived at, I mention it as apparently discrepant information which deserves further explication.

BIRD and TREVAINS' findings are much more in line with expectations on this score. However, it appeared to be a sense of diminished self-confidence (referred to earlier), as much as 'objective' communication deficiencies which were responsible for a reluctance on the part of their subjects to apply for promotion. And 18 of their respondents had not been promoted since being taken on by their present employer. As they note: "In some cases, this was simply because there was 'nowhere to be promoted to'. Others felt, however, that their hearing impairment had affected their self-confidence so much that they were reluctant to be considered for promotion" -

a finding confirmed by TREVAINS' subsequent study.

7. THE BUSINESS OF ACTUALLY FINDING A JOB

The business of searching the papers, visits to Job Centres and DROs, following up contacts, the completion of application forms, and, critically, the interview itself, have been somewhat cursorily dealt with in the literature. Such information as exists is of a general nature, covering all those handicapped by a communication impairment. Yet the rich possibilities for extending the analysis to include the hearing impaired have escaped the attention of previous researchers. And what actually goes on in the interview situation between a hearing impaired applicant and a prospective employer is an area which merits direct observation.

Otherwise, a few studies have commented on the source of help most commonly solicited by the deaf in their search for jobs - principally the need for help in completing forms, and having an intercessor to help at interviews. (The possible disadvantages of this have, as far as I am aware, only been addressed by CRAIG and SILVER, 1966). Occasionally, the mode of communication used is mentioned, again, however, neglecting to analyse the social consequences of lack of competence in 'standard' English in this crucial assessment situation.

Thus REICH (1974) found most sources of help were informal, friends and deaf agencies being approached most often. Other sources of help were found to be relatively unimportant. 85% of her applicants were accompanied by a friend or relative on their first job interview, declining to 64% in their current job interview. She concluded: "Thus the deaf appear to be very dependent for help in obtaining a job" - a finding supported by ADLER's (1963) earlier study. She had found that newspaper advertisements were geared to 7th or 8th grade reading. Many prelingually deaf read at 4th or 5th grades, or lower (the English equivalent being a reading age of approximately 7/8).

Similar findings regarding the source of help were made by BOATNER et al., and KRONENBERG and BLAKE. Over half of BOATNER et al.'s respondents found employment via relatives and friends. The "public employment agencies" were used by only 13% of their sample. An even lower proportion, 3%,

used the statutory services in KRONENBERG and BLAKE's STUDY. A similar lack of confidence is shown in the UK literature regarding the use of the DRO (DREWRY). Generally, few hearing impaired find their jobs independently. Yet little attempt has been made to try and establish why, and the subsequent effects of this on interview success (or otherwise).

Even for professional workers, CRAMMATTE found that relatives and friends played an instrumental role in the initial job-seeking process, for the 64% of his sample who wanted assistance. He concludes that "some sort of catalyst is necessary to trigger a favourable reaction to the prospect of employing a deaf person".

Unlike CRAIG and SILVER (op.cit) who considered that the practice of accompanying deaf job applicants to an interview adversely affected their "self-sufficiency image", CRAMMATTE considered the intervention of a third party invaluable. "It is only logical", he comments "... to assume that encomiums on the qualifications of an applicant are more readily believed when they come from a third party".

(My own findings suggest that the merits of reliance on a third party are at least debatable).

The interview situation itself has been dealt with more thoughtfully by other writers as a particularly problematic exercise in interaction management for those with communication handicaps generally. The crux of the matter is the emphasis Western cultural institutions place on a highly stylised oral interview, together with the increasing tendency to supplement this with a battery of verbally loaded tests demanding language skills which deaf people do not always possess. Thus LEMERT (1951) found in his investigation of stutterers that their search for employment was "frequently complicated by the more formalized employment procedures in urban communities .. the prospective worker is judged almost entirely upon the basis of this limited, segmental contact, largely verbal in nature".

As LEMERT fully realised, deviations from skill in the use of such stylised communicative performance are generally heavily sanctioned in our achievement-oriented culture. Similarly MOWER, WAHL and DOOLAN (1978) concluded that male lisping is so negatively evaluated by other adults

that "... there is a possibility that lisping could seriously jeopardise one's employment or social opportunities".

The interview was singled out for special mention.

Such an interactionist perspective has been conspicuously absent from the few references which, to the best of my knowledge, exist concerning impression management at interviews by the hearing impaired. Yet the interview situation provides a venue par excellence for the application of such a perspective. The few references I have found remain firmly 'descriptive', such as that of ADLER, referred to in the text.

One of the few references to the mode of communication used in the interview by the prelingually deaf is made by REICH and REICH (1976), in their follow-up study of 162 alumni of 2 Canadian special schools. From self-report analyses, they found : "More people used speech in their most recent interviews than in the first interview", but even this figure only amounted to 50% of their sample. 30% communicated by writing, 3% by manual communication (by which I assume the authors mean gesture, few employers being proficient in sign language), and 17% had no form of communication. Brief mention only of the poor impression made by "the less literate deaf" has been made by ZABELL (1962).

BLOCK (1968) comments on how he conceives of the difficulties: "...deafness is unique among handicaps in that it is the major one which retards free communication between an appointing officer and applicant. The attitude of an appointing officer (even one with the best will) towards a deaf person, therefore, cannot help but be coloured by whatever initial difficulties he has in interviewing a deaf person for a job. He is likely to be unfavorably impressed if the interview is made more difficult and awkward because of the failure of the appointing officer and the applicant to understand one another".

The implications in terms of the negative sanctions ascribed to deficient communicative performance and the unease this generates, between prospective employer and hearing impaired applicant are not tackled.

It is, perhaps, the continuous insistence on the uniqueness of hearing impairment - particularly the signing prelingually impaired - which has been a powerful factor in limiting the scope and breadth of analysis. Analogies with other communicatively handicapped people seem to have been

studiously ignored, thereby discouraging receptivity to alternative perspectives.

Much the most sophisticated reference of its kind I was able to find is that of GELLMAN (op.cit). Looking at the many factors militating against the prelingually deaf obtaining employment, he argues that failure is related to the lack of possession of the kind of "vocational persona consonant with occupational stereotypes, acting and looking like the sort of person who can fill the requirements of the job sought".

Further disadvantages are related to the restricted socialisation of the profoundly prelingually deaf, which prevents free movement among the wider community, tapping its resources and following up contacts which might lead to a job. They particularly miss out on access to leads which, if acted on promptly, might result in a job. Even in casual work, where there are few preliminaries and selection is generally on a first-come-first-served basis, it is a further instance, GELLMAN argues, of the way in which communication deprivation may disadvantage the hearing impaired in the business of finding a job. There analysis rests.

8. COMMUNICATION

As noted in Chapter 3, although hearing impairment is constantly referred to as a 'disorder of communication', the implications of being judged communicatively incompetent, and thus departing from the normative expectations people tend to have of smoothness of interaction, have been largely ignored in the literature (pace the descriptive and pragmatic studies of CRAMMATTE, PHILLIPS and BIRD and TREVAINS already referred to). The implications of deviating from 'standard' speech and linguistic competence in the competitive and exposed work of work have been scarcely acknowledged, with the exception of GELLMAN who identifies the need to maintain acceptable working relationships as paramount in job retention.

Yet 'communication difficulties' have been variously identified as one of the chief sources of complaint in employing deaf workers (BOATNER et al., KRONENBERG and BLAKE), although, interestingly, the problems were

not considered insurmountable. Otherwise, studies have concentrated on investigating the modes of communication used at work, again without attempting to pursue the implications of the meanings attributed by others to defective communicative performance in the work setting.

Thus the findings of LUNDE and BIGMAN, ROSENSTEIN and LERMAN, BOATNER et al., and KRONENBERG and BLAKE are broadly in agreement about self-reported modes of communication. About one-third of all deaf employed surveyed in these studies report the use of speech for their job-related communications; and two-thirds use varying combinations of speech, writing, manual communication or gesture.

ROSENSTEIN and LERMAN suggested that the mode of communication would vary with the subject matter. They found increased use of speech and writing in job-related matters, as opposed to that used in social communication. It is hardly a surprising conclusion. As few hearing people know sign language, it is reasonable to expect that speech and writing should increase in work situations, where 'standard' means of communication are the norm.

The value of participant observation in the workplace, although posing severe ethical problems for studying those hearing impaired who are engaged in trying to 'pass', is nevertheless a salutary antidote to some of the above assertions. PRINCE (1967) found significant discrepancies between self-reported communication patterns and those actually observed being used at work.

He has demonstrated how the use of gesture is underestimated (as reported) and that of writing over-estimated (as observed). He concluded: ". . . though reading and writing skills may be important to the deaf adult in acquiring concepts and information, they are not used extensively for communication purposes in a work setting".

(This is in line with my own understanding of the crucial importance of speech performance at work, and what happens to those who are deficient in this regard. Moreover, the cumbersome, time-consuming, if not alienating effects of recourse to writing have already been suggested in the text).

The mode of communication also varies with circumstance. SCHEIN and DELK (op.cit) analysed communication patterns according to whom they were directed. Not unpredictably, they found that with supervisors "a deaf person speaks about as often as he writes", with the supervisor replying in the same mode. Oral modes were also found to predominate in communication with work colleagues, unless the latter are deaf too, in which case manual communication predominates.

Participant observation apart, STORER has, perhaps, tackled the question of communication patterns used at work with the most sophistication, comparing and contrasting, for example, modes used at work with those used at home with friends and family. His least impaired respondents used, as predicted "predominantly oral means for talking, and, if appropriate, giving instructions at work".

Those with greater communication handicaps generally combined oral with graphic and kinesic modes.

The disparity between this pattern and preferred patterns of communication used at home was apparent. STORER concludes that ".respondents were prepared to use partly oral means of communication when among workmates and colleagues even if they did not with close relatives and friends".

And confirming an earlier finding of DREWRY, he found women more adept at oral communication than men.

What does emerge from this restricted data is that in the hearing world of work, most hearing impaired employees attempt to adapt their communication to the majority expectations. Recourse to other modes is only used when expressive and receptive communication skills are inadequate for the task in hand. And as with most minority languages, the use of sign is usually held in abeyance in confronting those using the dominant majority language. Regretfully, I can see no place in the work setting generally for the adoption of sign language. These patterned adaptations to hearing norms would appear to apply across the whole spectrum of hearing impairment - again a factor which has been largely ignored in the employment literature.

If a direct relationship between mode of communication actually used, its efficacy, and employment 'success' is postulated, this would suggest that the emphasis placed by MONTGOMERY and MILLER (1977) (and discussed in the text) on comprehension of written English rather than effective speech performance as the crucial theme is somewhat misplaced. It may well be that in the higher echelons of employment, comprehension of written English may make a crucial difference between success and failure. Again, for those hearing impaired totally deficient in speech, whose only means of communication is via writing, literacy may make the difference between failure and total and utter defilement. It is only in these two senses that I agree with the above authors' stress on the importance of functional literacy. It is lack of oral communication - and hence incompetent speech performance - which is the fundamental inhibiting theme at work at present.

The work of STUCKLESS (1975) would perhaps lend support to such a contention. Although his sample of 332 subjects were hearing, his findings have some quite positive implications for some hearing impaired workers. He found 83% of a subject's communication involved speaking and listening face-to-face, phoning and intercom communication taking up 12% of interaction time, and reading and writing only 2% of a person's normal working communication time. Furthermore, he found "By a considerable margin (78 percent) communication took place on a one-to-one basis rather than in groups" ... and "most of the communication was with fellow-employees (65 percent) of which most was with fellow employees in the same department".

As a generalised guide his findings are instructive. However, for those whose communication skills depart too grossly from expectations, the face-to-face nature of much work interaction has slightly ominous implications - borne out by my research findings. And obviously, for professional and managerial positions, the patterns he observed are likely to be different, the emphasis being on more group communication, contacts with people outside the immediate department, and stress on telephone management.

The few brief references to intelligibility of communication at work

have been made by LUNDE and BIGMAN, and ROSENSTEIN and LERMAN, but comparability of data is impossible due to the reasons stated earlier. The former, for example, asked their subjects to rate their ability to understand others (but not the reverse question). 30% reported they were able to understand conversations, 31% said their ability was limited, and 27% reported little or no ability. The reverse question, the intelligibility of the hearing impaired to others, was posed by the latter authors. They found that the women in their sample rated themselves slightly less favourably in their ability to understand others, as opposed to being understood.

How others actually perceive and react to the intelligibility of communication rarely seems to have been addressed. However, brief reference to irritation, friction and occasional hostility were mentioned by CRAMMATTE; and BIRD and TREVAINS noted that "Face-to-face communications with hearing impaired people may sometimes be difficult and time-consuming and hearing people, perhaps unconsciously, may reduce the amount of verbal interaction with them" -

a somewhat naive understatement of the problem, I suggest.

Whilst the opinions of supervisors concerning any work-related problems encountered with their deaf employees were sought by BOATNER et al., and KRONENBERG and BLAKE, and communication was indeed mentioned as the most common problem, chiefly in respect of conveying and ensuring accurate receipt of instructions, and in locating and paging deaf employees, exactly what these supervisors felt was not, however, forthcoming. Whilst such communication difficulties were considered a problem, they were, however, not deemed insuperable, (a finding later supported by STORER). The reader is nonetheless cautioned against too optimistic a response. Supervisors are likely to give more favourable replies than their actual behaviour on the job might warrant.

A salutary, and probably more realistic reminder comes from PHILLIPS' (1975 a and b) survey. Bearing in mind the general reluctance to display oneself in an unfavourable light, the harsher picture presented here is

more likely to represent a 'truer' version of others' perceptions of the hearing impaired as prospective employees. It may, because of the reasons already cited concerning attitude studies, still underestimate the gravity of the problem.

PHILLIPS found "Communication on the job is often seen as a major factor in keeping the deaf worker from being employable in certain occupational endeavours".

Areas of difficulty specifically mentioned by his respondents were the inability to use the phone & interaction with other workers, both in connection with the job and socially. He found many employers categorically rejected the possibility of hiring deaf workers in clerical positions because of the phone. And fundamentally, he found: "Jobs involving taking or giving special orders or engaging in specific job activities which require the accurate communication of specific information leading to a precise understanding of the job demand were not considered appropriate for the deaf worker".

Tailoring a job communication-wise to fit the particular needs of the hearing impaired was rarely considered (as CRAMMATTE also noted). There was, nevertheless, some uncertainty as to the actual communicative capabilities of the deaf in these circumstances, which tended to resolve itself into a "when in doubt, don't" policy on hiring.

But critically, it was real or purported communication difficulties which were cited as reasons for lack of promotion to supervisory or managerial posts. Interpersonal communication was often seen as "more than the deaf person could handle".

This is a useful juncture at which to discuss CRAMMATTE's findings on communication, a chapter of his book being devoted to a description of the communication patterns and particular communication difficulties of those hearing impaired who have managed to achieve professional status. However, again the analysis is largely instrumental and pragmatic, although providing useful pointers for future conceptual development.

Demands on communication skills are, not surprisingly, tougher at this level. As his population consisted of profoundly deaf respondents, how they managed to resolve the problem of expression and reception of

ideas is thus of more than ordinary interest.

He found that 84% of his sample used oral communication most frequently, with writing as a supplementary standby. His subjects used speech and lip-reading with considerable skill, it should be noted.

Specific communication problem areas were identified, namely participation in the organisation's grapevine, the 'P.R.' aspect of many professional positions, dealing with negative reactions from less well-known workers from other departments or outside clients; the phone, and conferences and meetings. Oddly enough, the problems inherent in the supervision of hearing employees merited only brief consideration as "a situation possibly conducive to friction".

He suggests this is a problem confined more to supervision at lower occupational levels.

The necessity for participation in the grapevine varied. For some it was a vital part of keeping abreast with any malfunctioning in the department. Contrary to expectations, 73 respondents were told voluntarily about 'grapevine information', rather than having to request it, suggesting, CRAMMATTE argues, "that casual social communication was fairly free and frequent for these deaf workers".

One has no means, however, of ascertaining how much of the information was distilled, abridged and omitted, the deaf respondent, of course, being least well placed to judge this.

The phone predictably caused problems. Sometimes phone duties were passed over completely to others, or handling the phone was mediated via a third party. (Legislation making the provision of T.D.D.s, and the appointment of interpreters mandatory had not been implemented at the time of writing).

Conferences appeared to pose more insuperable problems, although 51 respondents nevertheless attended them on a fairly regular basis. Often a combination of devices was used: a third party taking notes, briefing before and after the meeting; and lipreading where possible. But, signifi-

cantly, reliance on others was essential. It is also interesting that he found informal assistance of this nature was much more readily forthcoming than actual tailoring of the job to accommodate to a deaf person's needs. Where this occurred, it often consisted of the elimination of a particular duty (eg. phones) rather than a more positive, constructive approach.

CRAMMATTE concluded he was unable to find one particular determinant of professional success amongst his deaf population other than "competence and drive"- factors instrumental in any person's occupational success. I find his rejection of the salience of communication skills as at least one of the most crucial factors perplexing, given his initial insistence on the primacy of such skills at a managerial level. Possibly a higher level of oral competence was simply taken for granted. Or perhaps one may deduce that communication deficiencies in fact place no bar on promotion. This is not in accord with any other finding (cf. BENDERLY, op.cit).

What is, perhaps, suggestive, is the converse of his argument, which he does not consider: that lack of skill in communication has an absolutely detrimental impact on job prospects, totally disproportionate to the lack of other qualities deemed necessary for success.

Had any theoretical perspective underpinned the 'evidence' it would have been a great deal easier to take issue with the data. As it is, it is difficult to do more than describe what has been described. I have devoted some attention to it, nonetheless, as, apart from the study of BIRD and TREVAINS (op.cit), it remained, until the late 1970's, the most detailed and comprehensive picture of communication problems to date.

However, the most valuable study I have found of communication patterns and their concomitant social problems at work has been made not of the 'prelingually' deaf, but of an adult sample of clerical workers with acquired loss (BIRD and TREVAINS, op.cit). It represents something of a departure. Whilst traditional ground - mode of communication used, frequency of contact, those with whom subjects communicated most - is

covered, the study provides a fairly full discussion of the social and work problems to which difficulties in these areas give rise. Although the focus is practical and operational and, as the authors concede, descriptive rather than explanatory, 'communication difficulties' at work are at least located within a 'social problems' context.

Direct observation at the workplace was rejected, mainly because of anticipated reluctance on the part of hearing employees to being identified, particularly for those managing to conceal their impairment. But by sampling hearing controls in similar clerical posts, and the use of 'confirmers' (relatives or friends "who could discuss the effects of hearing loss from an observer's point of view"), the authors attempted to remedy the gap identified by PRINCE (op.cit) earlier. The use of both quantitative and qualitative data is neatly juxtaposed, although the full richness of what the latter has to offer is necessarily relegated to a secondary role. The smallness of the sample (34 clerical workers) has been criticised, but I suggest that the supposed necessity for large samples in order to give reliability and validity to studies has been grossly overrated.

The types of communication difficulties most frequently mentioned as occurring at work are broadly reminiscent of those identified by deaf respondents in CRAMMATTE's study. Thus their discussion of the impact of "a generally reduced level of communication" on employment prospects encompasses both the traditional areas already highlighted: job satisfaction, promotion problems, job acquisition; as well as areas which (CRAMMATTE, perhaps, apart) have been virtually ignored. These include exclusion from social activities at work, gossip, comradeship, the reduced quality of such social relationships as are established at work, and feelings of isolation and diminished self-confidence specifically related to the work situation.

Despite its pilot status and lack of conceptual underpinning, to my knowledge nothing comparable has been written relating communication de-

ficiencies so closely to the intricate pattern of formal and informal interaction at work. As with the subsequent larger study of TREVAINS (1982), it represents an attempt to make social sense of those hampered by a communication disorder, and its implications for the quality of working life of its victims.

Perhaps one obvious question concerns the validity of a direct causal connection between difficulties in communicative ability per se and the adverse effects on employment prospects. The many other variables which might mitigate or exacerbate an existing communication disorder in a work setting are necessarily omitted here - I think with some justification. It is, after all, communication skills, or the lack of them, which are the prime handicapping features of the hearing impaired.

A discussion of the studies of both CRAMMATTE and BIRD and TREVAINS raises the tantalising questions which prompted my own research: the need for a comparative study spanning the range of hearing impairment; together with a conceptual framework which would hopefully give coherence to the manner in which the hearing impaired are disadvantaged economically in our society. I have taken the study of BIRD and TREVAINS as my own point of departure, in an attempt to enlarge the scope of their "preliminary insights into the type of communication problems which /the hearing impaired/ experience".

9. ATTITUDES OF EMPLOYERS

A fairly well documented body of literature exists on employers' professed attitudes and preferences towards a variety of impaired people, (cf. inter alia, GELLMAN, 1959; RICKARD, TRIANDIS and PATTERSON, 1963; WILLIAMS, 1972; SCHROEDEL and JACOBSEN, 1978). Not surprisingly expressed attitudes vary with the nature of the particular impairment. Thus RICKARD et al. found that the deaf were less discriminated against than epileptics and those discharged from mental and penal institutions, but considered much less 'desirable' than the wheel-chair bound and those suffering from TB. WILLIAMS (op.cit.) concluded: "Though it may be good business to hire

handicapped persons, the assertion has never been proven for the typical handicapped person".

WILLIAMS' 1972 study found only 54% of his sampled employers would hire a deaf person for a production job "always" or "usually, but not always"; 25% replied "sometimes, but not usually"; and 3% "never". For managerial posts, 75% of his respondents said they would never consider a deaf applicant.

Some similarly discriminatory references to the way employers specifically evaluate the hearing impaired as negative hiring prospects has emerged in the literature (GREENMUN, 1958; PHILLIPS, op.cit; EMERTON and ROTHMAN, 1978; DE CARO et al, op.cit; and BENDERLY, op.cit). Much seems to hinge on whether prospective employers already have direct experience of impairment or not (not necessarily restricted to hearing impairment), or whether surveys are conducted against a background of ignorance of impairment generally, and of a particular condition. Thus in PHILLIPS' survey, uncertainty and a general lack of information about what constituted deafness seemed to promote a general disinclination to give someone a chance.

The earlier findings of BOATNER et al, KRONENBERG and BLAKE, and ROSENSTEIN and LERMAN would tend to lend some substance to this. Actual experience with deaf employees does tend to mitigate some of the grosser discriminatory practices and attitudes found by PHILLIPS. KRONENBERG and BLAKE, for example, found that despite difficulties in communication, 93% of supervisors of their deaf workers sampled rated their employees as average or above average. And in BOATNER et al's complementary study, 77% of his supervisors sampled favoured employing more deaf workers. ROSENSTEIN and LERMAN found consistently good ratings to be made by employers of their deaf alumni on follow up. (It should be noted that such ratings were not necessarily accompanied by improved occupational status or opportunities for their deaf employees.) And again, the reader is alerted to the dangers implicit in such 'attitude' questions.

The traditional received wisdom about the deaf, often relied upon to

justify a refusal to hire - namely absenteeism, and the risk of accidents - has been disproved in several studies, most notably that of HJORT (1972), who investigated interaction between deaf and hearing co-workers and supervisors with these particular issues in mind. He concluded that the deaf employee was generally perceived as a "diligent, dependable worker, whose record in regard to work performance (as assessed by supervisors and co-workers) is generally good or better than those of his hearing counterpart in regard to absenteeism or occupational injury, and who enjoys commendable respect from his co-workers and supervisors".

However, it should be noted that this study focussed on what HJORT himself described as an "occupationally successful group of deaf workers". Whether such a roseate picture would emerge from the occupationally less successful deaf worker is much more debatable.

Other studies have shown that this more tolerant attitude could be completely reversed by the experience of just one single unsatisfactory deaf employee (CRAIG and SILVER, 1966). The hearing impaired are no more nor less likely to make satisfactory employees than any other group of workers. Yet such is their precarious status, that experience of one 'rotten apple' seems to be successfully generalised to the detriment of the whole hearing impaired population. The implications of this have not been followed through in the literature.

Moreover, it was notable in the studies cited above that favourable attitudes towards the deaf as good workers did not appear to be translated into practical terms, by way of employing them in positions commensurate with their educational qualifications and abilities (as noted for HJORT's study); nor did it facilitate the efforts of those deaf employees who aspired to higher posts (NEYHUS, 1964; PHILLIPS, op.cit). Thus interaction between hearing impaired and hearing did not necessarily lead to positive practical improvements. Both CRAMMATTE's study and the earlier study of NEYHUS (of 80 deaf adults drawn from social and religious organisations for the deaf) lend substance to this. CRAMMATTE found that employers still held "strong doubts about deaf people being able to communicate sufficiently to hold any job",

despite his insistence that communication was not the critical variable, and direct evidence by his respondents which supported such doubts. And NEYHUS, despite the relatively low response rate of his study (43%) concluded that the comparatively low occupational status which his sample deaf population held could reflect a willingness to hire at lower levels of skills. However, it seemed to indicate a marked disinclination to go beyond this point into areas identified as requiring specific communication skills, ie. managerial and professional positions.

BIRD and TREVAINS concluded of their sample that "Employers may be sympathetic towards the partially hearing because of their handicap, but still not credit them with the same employment potential as a normal-hearing person".

What is evident from all this literature is the not unexpected discrepancy between expressed attitudes and actual hiring policies - the Achilles heel of all attitude surveys. Where discriminatory attitudes are evident, the situation may be regarded as particularly bleak. Thus REHAB. BRIEF (1979) notes of the work of SCHROEDEL and JACOBSEN (1978) "Unfortunately what an employer says about hiring practices and what that same employer does when confronted with a disabled applicant may be quite different. Evidence suggests that about 60 percent of employers say they would hire disabled workers. Only one-third do so. In other words, there is more verbalized intention to hire than actual hiring".

The literature again has referred largely to the prelingually deaf (BIRD and TREVAINS, and TREVAINS apart). BEATTIE (op.cit), however, found it quite impossible to make any generalisations concerning employers' attitudes to those with acquired loss. I would concur in this dilemma, for all hearing impaired people. So much lip service is paid to the "socially acceptable concept of employing the handicapped" (GARRETT, 1964) that reliance on a more meaningful evaluation of the existence of employer prejudice and discrimination must come from the hearing impaired themselves.

10. PREDICTIONS FOR THE FUTURE

The literature is again confined to the 'prelingually' deaf. SCHOWE wrote in 1944: "For deaf workers who can qualify, there will be better

understanding in industry, and a wider range of opportunity than ever before. For those who cannot measure up to employment standards which have been advanced to a new high level, there will be nothing much in sight except pauperism, and, perhaps, pensions or the sheltered workshop. The borderline cases, the marginal workers, will tend to disappear. They will either be in the labour force or they will be out of it entirely".

How far does this grim prognosis stand the test of time? To some extent it has been supported by events. To the extent that it has been supported by the projections made is somewhat more open to conjecture. Predictions have always been notoriously unreliable. Contingencies such as the oil crisis, the eruption of international hostilities in the Middle and South East Asia, and a world recession cannot always be catered for.

There is, nonetheless, a fair amount of unanimity in the projections which have been made - largely American - and their implications for the deaf and other 'marginal' workers. GELLMAN (op.cit), for example, points to the long-term effects of technological change which are increasingly "widening the gap between the culturally acceptable and the semi-acceptable or unacceptable".

In common with other impaired people, the deaf are regarded as "anomalous persons"

in our culture (JENSEMA and SHEARS, 1969).

KRONENBERG and BLAKE, and BOATNER et al. had already drawn attention to the critical nature of the deaf's employment situation. As the former note: "In any economy, the deaf are limited".

And BOATNER et al. argue strongly that "without modification in vocational training an already critical position will deteriorate".

Little modification has taken place. As BENDERLY (1980) notes, today the deaf are competing with "both the cheap labour of Asia and the advance of automation, trapped in the most stagnant reaches of American industry".

Data on the general trends which have taken place in employment over the past decade, and predictions made for future developments, - with obvious ramifications for the UK - have emerged from the work of FRIEDMAN (MARVIN, 1967), and the predictions made by the Bureau of Labour Statistics (1970). Some verification is provided by the data of SCHEIN (1978) and WESTCOTT and BEDNARZIK (1981).

FRIEDMAN has drawn attention to the need for a better educated and skilled workforce, acceleration of the urban shift, and a new development, that of the suburban shift, disadvantaging the inner cities traditionally the preserve of minority groups; the reduction of self-employment; and the trend away from heavy to light industry with concomitant effects on the status of blue-collar industrial workers.

Both FRIEDMAN and the B.L.S. emphasise the shift to service and white-collar jobs, with critical implications for the deaf employed in traditional blue-collar occupations and routine assembly line work. FRIEDMAN noted that in 1966 white-collar jobs represented 45% of the nation's total employment, whilst blue-collar jobs had diminished to 37%. The B.L.S. estimated that by 1980 the former would have increased to approximately 50% of the total workforce (some 68 million people), with a corresponding decrease in blue-collar posts.

These predictions have turned out to be substantially correct (WEST-COTT and BEDNARZIK, 1981). They comment: "The decline in employment during 1980 was concentrated in blue-collar occupations .. Total blue-collar employment dropped 1.7m. between the 4th quarter of 1979 and the third quarter of 1980".

And of the growth in white-collar employment, largely complementary to the growth of service sector employment, they note: "Service-producing employment continued to follow its long-run upward trend, although at a considerably slower pace".

B.L.S. predictions also drew attention to other significant trends: an increase in the labour force by about 20% to some 100 million workers, including a large proportion of younger workers (although this is likely to diminish in the 1990's as the birth rate irons itself out); a decline in hours worked; and a substantial rise in educational attainments required. Emphasis is placed on the changing content and skill requirements of many occupations. By 1980 B.L.S. estimated that only 1:16 adult workers will have had less than 8 years' schooling, and nearly 1:6 will have completed 4 years' college education. "The job outlook for the disadvantaged with limited schooling is likely to remain bleak",

they comment.

What these earlier predictions failed to emphasise is the large increase in both the US and the UK of the female labour force - both working and wishing to work, (SORRENTINO, 1981) - again with implications for the hearing impaired woman who is likely to be doubly inhibited in her chances of obtaining work, or obtaining satisfactory work.

As far as occupational breakdown is concerned, the predicted growth in the professional, technical and managerial sphere is likely to continue. Estimated as comprising 10.3 million workers in 1968, this was anticipated to rise to 15½ million in 1980 (B.L.S.) Clerical and sales positions were also expected to increase by about 50%. The service sector has expanded in the two growth areas envisaged by FRIEDMAN: namely local and national government, and the 'miscellaneous' service sector - real estate, retail and wholesale services, trade and finance, insurance, health and medical care, education, hotels and repair services. WESTCOTT and BEDNARZIK note: "The only services sector industry to post a noticeable job loss in 1980 was transportation and public utilities (70,000). However, employment was on the rebound at yearend".

The situation is changing so rapidly, however, that the next decade may well see changes in the proportion of growth in selected service sectors - witness the cut-backs in public expenditure by both American and British governments, and the privatisation of many public service jobs. 'Private' service industries - hotel and catering, travel, real estate and insurance may be expected to increase at the expense of education and health care. Again the implications for the hearing impaired worker, scarcely represented here, are bleak. It is only in the longer-term, when the full impact of changes in telecommunications become manifest, that the situation may improve.

The fate of skilled, semi-skilled and unskilled workers, as indicated in the literature, was predicted to be variable, if not tenuous. For skilled workers "Employment .. is expected to expand more slowly than total employment, rising from 10m. in 1968 to 12.2m. in 1980"
(FRIEDMAN)

For the semi-skilled, employment was seen as likely to decelerate. For the manufacturing sector, particularly the car industry, this has indeed proved to be the case.

Finally, the unemployment rate in the United States, which reached nearly 8 million, or 7.6% of the labour force mid 1980 is continuing its upward trend (11.5 million in November 1982). Whilst the impaired are not singled out for special mention, it may be speculated that they form a fairly substantial part of this figure as do teenagers and Blacks.

The implications of these predictions for the UK, whose economy is heavily dependent on that of the U.S. - and for the deaf populations of both countries, is hardly encouraging in the immediate future. As SCHEIN (1974b) notes: "This means that deaf workers will need to alter their occupational habits to keep pace with the shifting demands. Sixty per cent of male deaf adults in the NCDP sample were employed as craftsmen or semiskilled operators, while nearly half of the female deaf adults were similarly engaged. Only 8% of males and 11% of females held technical and professional positions. In short, most deaf workers are presently in occupations declining in demand or projected to undergo a small growth, while few are in the rapidly increasing categories".

There are very particular factors in the past and present economic socialisation of the deaf which militate against the change, flexibility and mobility which the above trends demand. WEINRICH (1972) defines these as follows:

1. The deaf person "enters the labour market later than his hearing counterpart because it takes longer to complete his formal education", thereby starting his career at a disadvantage, a factor commented on by MONTGOMERY (1967) and LAURITSEN (1972).
2. The ignorance, if not prejudice of employers has led to pre-hire examinations being "oriented towards the normal". Hiring is again delayed because of the deaf person's inability to fulfil on-the-job or apprenticeship training.
3. The deaf demonstrate a distinct tendency towards occupational immobility.
4. They are "disproportionately concentrated among the generally less desirable manual jobs and in industries in which automation and tech-

nological change have had the greatest impact".

These are factors which have already emerged in the literature reviewed to date. Taken collectively, they represent a dismal picture.

GELLMAN (op.cit) further notes the social factors which "..are stacked against the development of a successful work personality, and result in atypical vocational development"

for the deaf person. These include the lack of appropriate role models, lack of exposure to pre-vocational experience, the restricted life-space and "limited socio-cultural horizons" of many deaf people, arising out of years of residential schooling and - I am obliged to add - acculturation in a deaf community noted for its stress on sociability rather than achievement. Early life experiences, he suggests, which arise from restricted language input and communication deprivation "seriously distort perceptions of reality".

The result is, he powerfully argues "..the formation of work personalities at variance with culturally acceptable stereotypes ... the vocational persona is provincial" (my italics.)

Thus the developmental experiences of the deaf ".. do not transmit acceptable patterns for a work personality".

These are then reinforced by the patterns of work subsequently followed.

I find these 'social' arguments even more compelling than the strictly economic factors which, as argued, militate against the possibility of successfully surmounting the obstacles posed by new trends in industry.

The educational implications, above all, are forbidding. Illiteracy, or marginal literacy, and innumeracy will render people unemployable.

Yet as BOYCE WILLIAMS (in WEINRICH, op.cit) - and many before and after him - comments: " ..deaf youth generally terminate formal education at 18 or 19 years .. A large number are functionally illiterate, reading below 4th grade and expressing themselves correspondingly".

Limited opportunities for further education will compromise the deaf adolescent's prospects still further.

As has been evident from the literature, the deaf population has traditionally been employed in the now declining blue-collar sector, whilst most of the growth in employment opportunities has occurred in the ser-

vice sector - and now expanding micro-chip industry. The service sector, with its heavy emphasis on 'standard' communication skills, has not historically featured as a large-scale employer of the deaf; and disputes over educational philosophies have hardly encouraged entry into the new technology.

The very essence of success in the service sector is on face-to-face interpersonal communication. EDGAR LOWELL (1971) queries: "Do we need to re-examine the Service occupations to determine which ones place a premium on personal face-to-face communication?"

The answer would seem to be yes, if one of the main avenues for future employment of the hearing impaired is going to lie in this sector. 'Polish', 'style', 'personality' as manifest in effective speech performance and successful impression management are at a premium here. They are often the very skills which a communication deficit - and, critically the manner in which it is evaluated by society at large - preclude.

And success in the burgeoning micro-chip arena is entirely dependent on a speedy resolution of the age-old controversy over oralist/manualist education in favour of the adoption of genuine Total Communication. The attendant risks this poses for the adulteration of sign language - particularly BSL proper - must be confronted.

The accuracy of the above predictions has possibly even been underestimated, as further reference to SCHEIN's (1978) most recent work demonstrates. The results, he comments "...present a disturbing picture of the deaf population's economic decline during the five years, 1972-1977 While most people - deaf and hearing - have suffered somewhat during the stagflation, deaf people have lost much more than the general population".

What has been crucially absent, to the best of my knowledge, from these dire forecasts, is any attempt to look at the implications of telecommunications technology say 20/30 years hence. If, as suggested, the emphasis will shift from employment in large conglomerates to much more isolated employment in the home, and from dependence on traditional auditory input - and thus oral communication skills - to visually handled mat-

erial, the implications for the hearing impaired take on quite a new dimension.

The present literature is not without its short-term 'solutions'. The role of counselling and vocational rehabilitation services is crucial. Re-training courses urgently need to be established for deaf workers previously trained in now obsolescent jobs. The inculcation of attitudes which encourage change, flexibility, and above all mobility is vital. All these have been recognised by many of the authors mentioned in this Review.

Finally the deaf cannot wait for the educational controversies so long raging over their heads to be resolved. Education for a fast-changing technology with emphasis on the acquisition of 'standard' communication skills is a prime goal. It is not something which fluency and pride in Sign Language alone can resolve. The ability to straddle both deaf and hearing worlds - with a mastery of manual and oral means of communication (which early exposure to Sign has indeed been shown to facilitate) - will determine the future economic viability of the deaf. This has not, however, been a position stressed in the literature. And longer-term economic viability requires possession of both oral and literacy skills. Societal reaction, too, must be modified. The possibility for this is enhanced where minority groups are able to straddle both worlds. Jewry, for example, has survived 2,000 years of Diaspora by a combination of preservation of its culture and adaptation to the majority culture for its economic survival. So it must be for the hearing impaired.

Thus, whilst the literature on employment has highlighted an area of need and provided the researcher with some basic 'leads', what has been conspicuously absent is any systematic attempt to understand the processes at work behind this evidently dismal picture. I contend that without such an understanding, little progress can be made. As has been evident, the literature on employment prospects has remained firmly wedded to a static level of analysis, content to rely on fairly crude indicators

from which to draw inferences, without any attempt to penetrate the many layers of meaning and 'reality' which constitute the problem.

The instrumentality of the literature, and its focus largely on those deafened 'prelingually' have ensured that a global view of the hearing impaired as part of a wider picture of 'outsiders', marginal to society, is obscured. It is above all parochial in nature. It has revealed itself as a series of dislocated 'facts'. The urgent necessity to locate these 'facts' within a broader explanatory theoretical framework to give coherence to what are otherwise unrelated findings is what I have attempted to do.

APPENDIX 2: TABLE 2a

SELF-ASSESSED HEARING IMPAIRMENT OF RESPONDENTS BY COMMUNICATION GROUP

RESPONDENT	COMMUNIC. GROUP	AGE	AGE OF ONSET	TYPE OF DEAFNESS	CAUSE	PERCEIVED SEVERITY	
						WITH AID	NO AID
Miss A.S.	I	23	6½	"Middle Ear"	N/K	Mild	Moderate
Mrs. I.Y.	I	50	5	N/K	Mastoiditis	-	Slight
Mr. L.M.	I	36	16	Conductive?	Infection	Fairly Severe	Severe
Miss V.G.	I	50	35	S.Neural	Menière's* Disease	-	Mild/Mod.
Mrs. G.L.	I	57	50	S.Neural	Menière's Disease	-	Mild/Mod. (Totally deaf in R. ear)
Mr. C.P.	I	55	7/8	S.Neural	Measles as child?	Slight	Severe in L.ear
Mrs. L.L.	I	47	25	S.Neural	Meningitis	Severe	V. Severe (2 aids)
Miss B.G.	I	22	Birth	S.Neural	Rubella	Moderate	Quite Severe
Mrs. S.B.	I	41	35	"Nerve deafness"	Hereditary?	Slight	Moderate
Mr. D.O.	I	47	19	Mixed cond. & S. Neural	Infection	Moderate	Moderate
Miss P.L.	I	29	Birth (parents think)	"Lost nerve"	Measles?	-	Severe in L.ear (Asymmetrically deaf)
Mrs. C.O.	I	53	25 "or earlier"	"Nervous h. loss"	N/K	Moderate	Severe (2 aids)
Mr. P.E.	I	54	c.44	N/K	N/K	Mild	Mild

*Menière's Disease is characterised by sudden onsets of vertigo, nausea, inability to understand speech, and loud roaring tinnitus. The syndrome was first described in 1861 (DAVIS and SILVERMAN, 1978)

<u>RESPONDENT</u>	<u>COMMUNIC. GROUP</u>	<u>AGE</u>	<u>AGE OF ONSET</u>	<u>TYPE OF DEAFNESS</u>	<u>CAUSE</u>	<u>PERCEIVED SEVERITY</u>	
						<u>WITH AID</u>	<u>NO AID</u>
Mr. S.W.	I	33	23 "noticed"	N/K	N/K	Mild	Quite Severe
Mr. C.R.	I	51	10 months	N/K	"Abscess"	Moderate	Quite Severe
Mr. A.E.	I	49	c.39	"Nerve deafness"	Hereditary	Quite Severe	Quite Severe
Mrs. D.H.	I	60	52	"Middle ear"	Infection? Hereditary?	Moderate	V. Severe
Mr. B.S.	I	46	c.36	N/K	Freak storm?	Moderate	Quite Severe
Miss N.P.	I	24	"Always been deaf"	"In the brain"	Hereditary	Mild	Mild
Mr. B.U.	I	26	6 months	"Inner ear"	Meningitis Hereditary	Moderate	V. Severe
Mrs. A.B.	I	54	c.27	"Nerve deafness"	N/K	Mild	Severe
Mrs. A.H.	I	34	c.26	"Middle ear"	Hereditary	Mild	V. Severe (R. ear)
Mrs. B.C.	I	45	c.40	"Middle ear"	N/K	--	Mild L.ear V. Severe R.ear
Mr. B.T.	I	66	27	"In nerve ends"	Gun blast	Moderate	Severe
Mr. S.G.	II	48	34	N/K	RAF injury?	Quite Severe	Severe
Mr. W.C.	II	52	"Since child-hood"	N/K	N/K	Quite Severe	Severe
Mr. N.M.	II	57	56	"S. neural"	Menière's Disease	Moderate	Quite Severe
Mr. S.L.	II	26	Diagnosed at 6 Probab. 18 months	"S. neural"	Meningitis?	Severe	V. Severe (2 aids)
Mr. J.R.	II	53	c. 49 "or much earlier"	"Nerve deafness"	Industrial noise	Moderate	Quite Severe

RESPONDENT	COMMUNIC. GROUP	AGE	AGE OF ONSET	TYPE OF DEAFNESS	CAUSE	PERCEIVED SEVERITY	
						WITH AID	NO AID
Mrs. E.I.	II	42	c.5 "poss. earlier"	N/K	N/K	Moderate	Quite Severe
Miss C.G.	II	20	Birth	"The nerve"	N/K	Moderate	Severe
Mr. F.J.	III	33	1	N/K	Meningitis	Moderate	Quite Severe
Miss L.S.	III	30	aet 2, diagnosed at 5/6	N/K	Measles	Quite Severe	Severe
Mr. H.H.	III	40	2	"Inner ear"	Maternal ru-bella	Mild	Quite Severe
Mrs. B.L.	IV	32	Birth	"Nerve deafness"	Measles?	Severe	V. Severe
Mr. E.B.	IV	42	14 "or earlier"	"Inner ear"	N/K	Severe	Severe
Mrs. S.T.	IV	53	Poss. birth. Diagnosed aet 12	"Nerve deafness"	N/K	--	V. Severe
Mr. M.C.	IV	40	Birth	N/K	Familial?	--	V. Severe
Mrs. N.F.	IV	52	7 "or poss. birth"	"S. Neural"	Scarlet fever? Measles?	Severe	Severe
Mr. C.S.	V	23	Birth	N/K	N/K	--	V. Severe
Miss A.L.	V	54	50	"Inner Ear"	Virus?	--	V. Severe
Mrs. F.S.	V	33	Birth? Less than aet 2	N/K	N/K	Quite Severe	Severe
Miss H.Q.	V	30	Birth	N/K	N/K	--	Severe
Mr. G.C.	V	34	Birth	N/K	Maternal rubella	Slight	V. Severe
Miss M.A.	V	43	1½	N/K	Meningitis	Quite Severe	V. Severe
Miss G.F.	V	41	3	"Perceptive"*	Hereditary	V. Severe	V. Severe

* The term "perceptive" deafness has now fallen into disrepute, described by DAVIS (in DAVIS and SILVERMAN, 1978) as a "wastebasket term once used by otologists to catch everything that is not conductive". For many years it has been synonymous with 'nerve deafness'.

<u>RESPONDENT</u>	<u>COMMUNIC. GROUP</u>	<u>AGE</u>	<u>AGE OF ONSET</u>	<u>TYPE OF DEAFNESS</u>	<u>CAUSE</u>	<u>PERCEIVED SEVERITY WITH AID</u>	<u>PERCEIVED SEVERITY NO AID</u>
Miss P.K.	V	31	11 months	"Inside"	Meningitis	-	V. Severe
Mr. D.S.	V	21	Birth	"Nerve deafness"	N/K	-	Severe
Mr. M.R.	V	18	Birth	"Nerve deafness"	Maternal ru- bella	-	Quite Severe
Miss R.C.	V	33	2	"Inner Ear"	Meningitis	-	V. Severe

APPENDIX 2: Table 2b

COMMUNICATION MODES OF RESPONDENTS*

COMMUNICATION GROUP I

Respondents were all oral with fluent speech, good lipreading skills where residual hearing was seriously impaired, literate, and able to communicate 'normally', ie. using 'standard' speech, both at work and at home. Mrs. L.L. and Miss A.S. used sign to facilitate their jobs; and only Mr. L.M., Miss B.G. and Mr. B.T. used sign on the occasions during their leisure time when in the company of signing deaf friends.

COMMUNICATION GROUP II

Respondents were again all 'oral' communicators, although their lipreading skills were somewhat less fluent and subjects had difficulty sustaining lipreading over a period of time. All were literate, although Mr. J.R.'s literacy was poor (this may or may not be due to his hearing impairment). All communicated orally both at home and at work. None signed (Miss C.G. expressly avoiding it).

COMMUNICATION GROUP III

Respondents all possessed some speech, but their competence was increasingly impaired. Mr. H.H. combined oral skills with the use of sign at home to communicate with his deaf wife and join in the activities of the deaf community. Mr. F.J. repudiates the use of sign entirely. Miss L.S. was forbidden to use it as a child, but despite parental pressure now is beginning to learn to use it 'socially'. All three respondents' literacy was somewhat impaired. All try to communicate orally at work, with recourse to gestures and notes if there are difficulties.

COMMUNICATION GROUP IV

3 respondents, Mrs. B.L., Mrs. S.T. and Mrs. N.F. used combined methods of oralism and manualism - being essential ingredients to their jobs with the deaf. Socially, only Mrs. S.T. preferred the use of sign, which she also used at home with her deaf husband. The oral skills of all respondents were poor, with lipreading skills largely minimal. All respondents were literate. Mr. M.C. and Mr. E.B. used a combination of speech and writing at work, with recourse to gesture if necessary. Both Mr. M.C. and Mrs. N.F. reverted to 'speech' at home, Mr. M.C. having belonged to the deaf community, but now deferring to the oralist pressures of his deaf wife.

COMMUNICATION GROUP V

6 respondents in this Group signed as their preferred mode of communication. At work, however, they were obliged to use a combination of writing and gesture, their speech skills being minimal, or non-existent. Their literacy varied, sentence structure often reflecting the use of BSL (cf. Miss M.A.) Both Miss A.L. and Miss G.F. rejected the use of sign, were literate, and communicated one way only by speech (however discordant in the latter case), and the use of writing at work. Miss P.K., Mr. C.S. and Mr. M.R. were without any vehicle of communication at work or at home, other than gesture and home-made sign, comprehensible only to their immediate family.

* cf. Appendix 9 "Ease of Communication with .." Scale.

APPENDIX 2: Table 2c

<u>RESPONDENT</u>	<u>QUALIFICATIONS</u>	<u>PREVIOUS JOBS</u>	<u>PRESENT JOB</u>	<u>DURATION</u>	<u>DESIRED JOB</u>
Mrs. I.Y.	R.S.A.	Secretary (18 yrs)	Sec.	7 mos.	Same job locally
Mr. L.M.	Evening classes accountancy (not contd.)	Asst. to Accountant Dr's receptionist (Others)	Unemployed	1 yr.	Horticulture/Art
Miss V.G.	B.A. Divinity Teacher training	-	Primary school teacher	25 yrs.	Same
Mrs. G.L.	Teacher training	Nurse, C.S.	"	11 yrs.	Just retired
Mr. C.P.	-	Carpenter Engineer	Scientific In- strument maker	12 yrs.	"Same job but further up ladder"
Mrs. L.L.	Sec. College (8 '0's) L.R. tutor's course Adult teacher train- ing (not contd)	P.A. to Univ. Registrar	L.R. Tutor	2 yrs	Admin. post to help deaf
Miss B.G.	Dip. Catering Mgt.	-	Cook/waitress	10 mos.	University/S.worker
Mrs. S.B.	12 week nursing course	Dressmaker Hospital auxil.	District Nursing Asst.	5 yrs.	Same
Mr. D.O.	E.R.C.	Ward cleaner, Army, Receptionist Centre for Homeless, Helper, Borstal Community Home	Unemployed	nearly 2 yrs	Return Community Home/ Repair hearing aids
Mrs. C.O.	'A' level Music Proficiency sh/- hand & typing	Demonstrator, Cosmetic Co,	Clerical Officer	13 yrs.	Beautician (own salon) Join DHSS Fraud Squad
Miss P.L.	Sec. College	Temp. sec. posts	Sec.	1 month	Admin. post/L.R. tutor
Mr. S.W.	B.A., Dip. Soc. Work	Untrained s.worker	Family therapist	4 yrs.	Same

<u>RESPONDENT</u>	<u>QUALIFICATIONS</u>	<u>PREVIOUS JOBS</u>	<u>PRESENT JOB</u>	<u>DURATION</u>	<u>DESIRED JOB</u>
Miss A.S.	C.Q.S.W.	C.S.V. with phys. disabled (4½ yrs)	Res. social worker	3 mos.	More "community-based"
Mr. P.E.	-	Messenger	C.O. (C.S.)	7 yrs.	Transfer other depts.
Mr. C.R.	-	Guillotine op. (31 yrs)	GPO Sorter	1 yr.	Continue old trade
Mr. A.E.	B.A.	Actor	Actor	27 yrs.	Same
Mrs. D.H.	Evening classes sh'hand/typing	Audio sh/typist	Typist	18 yrs.	Regain sh'hand
Mr. B.S.	Telecomm. course	Telecomms.	GPO Sorter	12 yrs.	Telecomms.
Miss N.P.	'O' level Maths TOPS course sec.	Audio typist	Personnel Recruitment Officer	6 yrs	Teaching
Mr. B.U.	BA Theology	-	C.O.(Metrop. Police)	3 yrs	Same
Mrs. A.B.	B.A., Postgrad. Dip., Welfare Rights	W.A.F.	Organiser, welfare rights	6 yrs	Content
Mrs. A.H.	E.R.C., Bookkeeping/Accountancy "A' level standard"	Security Clerk 9 yrs.	Unempld.	-	Bookkeeper
Mrs. B.C.	'O' levels, Sec. college	Sh'hand typist	Senior Sec.	6 yrs.	Legal Adviser
Mr. B.T.	-	Dental mechanic Motor mechanic	Leather worker	5 yrs.	"Further up"
Mr. S.G.	Mkt. gardening app'ship	Milkman, Baker	Machine op.	12 yrs. (red. 2nd interview)	Farm worker/mkt. gardener
Mr. W.C.	Abrasive disc cert.	-	Line Setter	25 yrs.	Electronics
Mr. N.M.	RAF Class I fitter Day release toolmaker	Press toolmaker	Sales Exec.	8 yrs.	Same

<u>RESPONDENT</u>	<u>QUALIFICATIONS</u>	<u>PREVIOUS JOBS</u>	<u>PRESENT JOB</u>	<u>DURATION</u>	<u>DESIRED JOB</u>
Mr. S.L.	B.A. (LIB), Parts I and II Law Soc. exams	Pupil barrister	Copy editor	1½ yrs	-
Mr. J.R.	E.R.C.	Multiple	Lathe work	4 weeks	Electronics
Mrs. E.I.	-	Dressmaker, mach- inist, phone cleaner	Packer/tea lady	2 yrs.	Dresspacking
Miss C.G.	4 'O' levels	-	Reviewer's Asst.	2½ yrs	'A' levels,/Univ.
Mr. F.J.	-	c. 11 jobs	Fork lift truck driver	6½ yrs. (red. 2nd interview)	Woodwork/carpentry
Miss L.S.	E.R.C.	c. 15 jobs	Cleaner	5½ yrs	Policewoman/S. Worker
Mr. H.H.	TOPS course, Open Univ. (1½ credits)	"Too numerous .."	Wireman/Assembler	3 mos.	Elec. Engineer
Mrs. B.L.	-	Typist/Clerk,/Fac- tory work, pharmacist's asst.	P.T.Masseuse/re-	4 mos.	Journalist
Mr. E.B.	Grade A 'O' level English	Typist/Clerk	Typist	7 yrs.	Publishing
Mrs. S.T.	-	Canteen,/cashier machining,"various"	P.T. Signing Tutor	1 yr.	Teaching F.T.
Mr. M.C.	2 'O' levels, Stage 1 Accountancy prof. exams	Clerk	Accountant "qualified 19 yrs. by experience"		Same
Mrs. N.F.	'O' levels, Open Univ. course	Draughtswoman	Asst. s. worker	1 yr.	Full s. worker status
Mr. C.S.	E.R.C.	Factory work	Unempld.	Sporadic Current spell c. 4 mos.	Painting/Dec.

<u>RESPONDENT</u>	<u>QUALIFICATIONS</u>	<u>PREVIOUS JOBS</u>	<u>PRESENT JOB</u>	<u>DURATION</u>	<u>DESIRED JOB</u>
Mrs. F.S.	-	Bakery work/Machinist	Washer-Up	14 mos.	Check-out lady, local Sainsbury's
Miss A.L.	Evening classes Typing cert.	Shop asst./Engraver	Copy-typist	16 yrs.	Same
Miss H.Q.	Accounting Dip. Electronics course (US)	Accountant's asst.	Senior Computer Tester & Solderer	2 yrs.	Teacher for Deaf
Mr. G.C.	-	Photocopier	Clerical Asst. (C.S.)	15 yrs.	S. Worker for Deaf
Miss G.F.	1 yr. Univ. (Chem- istry)	Engineering Drawing/ Medical Illustration	Graphic Designer (Co-Director)	6/7 yrs.	Doctor/Workshop for Deaf
Miss P.K.	-	Factory work/Photo- copier	Assembler	8½ yrs.	-
Miss M.A.	-	Machinist/Word Pro- cessor	Cleaner	3 yrs.	Verifier
Mr. D.S.	Skill Centre, Q.E. College for Disabled, Leatherhead (electronic wiring)	Miller	Semi-prod. work wiring	5 mos.	Prototype wiring
Mr. M.R.	-	Lampshade maker/ Shoe repairer	Unempld.	4 mos. (2nd period in year)	D/K
Miss R.C.	Pitman and RSA Ty- ping I and II	Copy typist	Copy typist	8 yrs.	Word Processor

APPENDIX 3: CRITERIA FOR SELECTION OF RESPONDENTS

The criteria I decided upon in the selection of a sample reflected my interest in focussing on a broad spectrum of hearing impairment. They were as follows:

1. Age range: 22-55
2. Living in the Greater London area
3. A balance of sexes (if possible)
4. In employment, or if unemployed at the time of the interview, with employment experience since the onset of hearing impairment of not more than 2 years ago, and wanting work.
5. As large a spectrum of hearing loss as I felt I could 'realistically' handle
6. Not multiply handicapped
7. Mother tongue English

It will be noted that the criteria are fairly wide-ranging. The rationale for this lay in anticipated difficulties in finding respondents (BIRD and TREVAINS, 1978; TREVAINS, 1982). Ideally, it would have been useful to have added one further stipulation, namely similarity of occupation, but the experience of the above authors in obtaining subjects within one occupational category deterred me. (In the event, the wide range was more than justified).

The justification for the choice of criteria is as follows:

1. Age Range

I was anxious to exclude school leavers as they have been the subject of many other research studies (DREWRY, 1958; MONTGOMERY, 1967; RODDA, 1970; STORER, 1975, and others). Moreover, I particularly wanted to study what is probably a disappearing group of the adult workforce. The adult hearing impaired are likely to be among the last generation of employees committed to the traditional work ethic, where training for one job is presumed to last until retirement, and to be engaged in trades traditionally occupied by deaf workers.

Technological developments are likely to have disproportionate effects on the work patterns of the younger hearing impaired emerging from schools in the 1980's. I was also anxious to exclude the elderly as hearing impairment tends to be just one of a complex of ailments associated with the process of ageing, and not necessarily the main handicap throughout adult life. (The question has, in any event, been addressed by HERBST, 1981; HERBST and HUMPHREY, 1981; and - for the deaf community - BECKER, G., 1980).

However, I modified the age limits to include those prelingually deaf who had left school to make up the signing and orally deaf populations - a decision made when my 'snowballing' sub-group got under way. And I included 4 respondents over the age of 55, one of whom had retired, a further one of whom had retired at corroboration interview, and the remaining 2 of whom were still working; but all of whom had had considerable experience of dealing with the handicap throughout their employment careers.

2. Restricting respondents to those living in the Greater London area simply reflected the practical necessity of restricting travelling as far as possible, as I do not drive. (However, in the event, one respondent I visited for a weekend in Nottingham, and another visited me from Sussex).

3. It was hypothesised initially that male and female perceptions might differ, and hence a balance of sexes was positively sought. Ultimately, this was not an issue I chose to analyse.

4. Whilst it was anticipated that some respondents might well be unemployed, it was essential that the hearing world of employment had been experienced, and that such experience was not so far removed from memory as markedly to distort perceptions.

5. By the time I embarked on the empirical work, I had learnt the rudiments of pidgin sign. However, I was acutely aware that my skills were then quite insufficient for me to be able to communicate with the signing deaf. The

rationale for persevering with it at all was my speculation that I might well come across respondents who used both oral and manual communication and might be more receptive to a researcher who was trying to learn. (This happened with Mr. H.H., whose wife used manual communication only. As there was no other room for her to retire to during the interview, I was grateful for the possession of even courtesy signs to alleviate any feelings of her being ignored). It was also intended as a 'back-up', a reserve in case, at a later stage, I felt able to sample those profoundly prelingually deaf with marginally intelligible speech, but whose preferred mode of communication was sign. As it transpired, from mid 1981 onwards, I learnt sufficient sign language to enable me to include a small number of signing respondents in the sample. I eventually sampled the whole spectrum of communication modes.

6. It was obviously necessary to exclude other impairments, to avoid the dilemma of knowing what perceptions and meanings related to which impairment.

7. Similarly the exclusion of those whose mother tongue was not English was intended to obviate the situation of dealing with a double linguistic handicap. 2 respondents, born respectively in Burma and Italy, were, however included, having adopted English as their 'native' language.

APPENDIX 4: SOURCES APPROACHED FOR RESPONDENTS

1. Data Sources either not feasible or sources refused

(a) Schools: Oak Lodge. The Deputy Head suggested that the tracing of records dating back sufficiently to cater for the age group I had in mind might be difficult.

(b) Royal National Institute for the Deaf - no direct referrals available.

(c) British Association for the Hard of Hearing. The Director suggested that members of Hard of Hearing Clubs would probably be over the age limits I had specified in my criteria

(d) The Link Centre for the Deafened in Eastbourne. Whilst Ms. R. McCALL was kindly prepared to give me every co-operation, her interest was understandably orientated towards a study of the adventitiously deafened only.

My wish to sample comparatively was not taken up.

(e) Royal Association for the Deaf and Dumb, Shepherds Bush Club. The Rev. Howard White offered me every help and facility. Although he offered to arrange a flow of 'helpers' to be on hand to help with 'translation', this offer was not taken up as my proficiency in sign language at that stage was far too rudimentary to enable me to interview signing deaf subjects, even with any help which could be arranged.

(f) The City Literary Institute. Sample refused owing to my wish to sample comparatively, my 'lack of credibility', and preference for other research requests.

(g) The National Union of the Deaf. Mr. Ladd was happy to refer me to subjects, but at that stage, the same arguments applied as with the Royal Association for the Deaf and Dumb.

2. Data sources successfully negotiated

(a) Hillingdon Social Services Department: 9 respondents (1 refusal, 1 unable to use)

(b) The Employment Rehabilitation Centre, Perivale,: 3 respondents. (14 letters sent, plus 11 'chasers' with no response).

(c) The Breakthrough Club: 9 respondents, no refusals. Direct contact.

(d) Lipreading and Literacy classes of the Boroughs of Hounslow and Richmond: 7 respondents. Both direct and indirect contact.

(e) The Royal National E.N.T. Clinic, Grays Inn Road: 13 respondents. 28 subjects were contacted, 3 letters were returned 'address unknown', 1 subject was unwilling to take part, no response came from the remainder who were all sent 'chasers'.

(f) 'Snowballing Group': 9 respondents. Direct and indirect contact. No refusals.

(g) Hillingdon Hospital Audiology Department - suggested sample selected by Ms. Jackie Hartley, Chief Audiometrician, not used.

Response rate

50:78

Sample comprised

27 women, 23 men

Average Age

Women: 40.1

Men: 41.3

APPENDIX 5: SPECIMEN LETTERS

1. Specimen letter to postlingually hearing impaired respondents* following permission to contact subjects by:

- (a) Mrs. B. Langford, Hillingdon Social Services Department
- (b) Mr. Humphries, Perivale E.R.C.
- (c) Dr. Stephens, Royal National E.N.T. Hospital

Current address
Phone number

Dear ...

I am carrying out a research project at Brunel University with the help of He/she has given me your name and address for me to contact you directly. We both very much hope that you will be willing to take part in the study.

I am studying how people with hearing difficulties get on at work, and whether they have problems both in obtaining work and in getting satisfactory work. I am interested in any practical difficulties you yourself might have experienced, as well as social difficulties.

I should very much like to come and meet you and am happy to travel to your home address. Everything you say will be treated in confidence. No names will be used in the project. The actual interview should last about 1½ hours. I should also like to do a small hearing 'test' at the end of the interview - you will probably have done something like it before. I hope we may be able to talk on our own for the sake of privacy.

If you are willing to take part, I should be grateful if you could complete the tear-off slip which is enclosed and return it to me in the stamped addressed envelope which is also enclosed. If you are working in the day-time, could you tick which evening you prefer. If you would prefer a weekend, please let me know. And if you work shifts, or are not at work at the moment, I am free to come during the daytime any day of the week. Would you like to give me your second choice, so that I can avoid duplication?

When I have received the return slip, I will either write to you or phone you to arrange an exact date and time for us to meet. Please would you also kindly sign the declaration giving permission for me to talk with you.

I look forward to hearing from you,

Yours sincerely,

* (a) and (b) also included some prelingually deaf subjects

NAME

ADDRESS

Phone number (if possible)

I confirm that I am willing to take part in Mrs. Pinder's research project

Signed

MY MOST CONVENIENT TIMES ARE (PLEASE TICK 1ST AND SECOND CHOICE):

Wednesday Thursday Friday Saturday Sunday

Morning

Afternoon

Evening

I should like you to call at (PLEASE STATE A TIME)

.....

1. Specimen letter to prelingually deaf respondents

Current address

Dear ...

I am doing research at Brunel University to look at the problems those with hearing loss meet at work - both in getting a job and in finding a good job.

I have been to see at and he/she has asked if you would help me in this project? He/she has given me your name and address for me to contact you direct. Could you sign the enclosed slip if you would like to take part?

I should like to come and meet you and could come to your home. No names will be used in the research, and everything you say will be private. I should like to talk with you for about 2 hours, and then do a small hearing test. You will have done something like it at ...

Could you fill in on the enclosed slip which times you would like me to call (morning/afternoon or evening) and what hour of the day or evening. I have enclosed a stamped addressed envelope for you to post the slip back to me.

When I get your reply I will write to you to arrange an exact date and time for us to meet.

I look forward to meeting you,

Yours sincerely,

APPENDIX 6: FIRST INTERVIEW
SCHEDULE

NAME Male Female

ADDRESS

SOURCE

Age 25-35 35-44 45-55

1. YOUR HEARING LOSS

1. How old were you when you first began to have serious trouble with your hearing?

At birth — Less than 2 — 2-5 — 5-10 — 10+ —

2. Is it middle ear loss? Inner ear loss?

3. How would you describe the degree of your hearing loss?

- (a) With a hearing aid
- (b) Without a hearing aid

SHOW CARD 1

Mild Loss Moderate Quite Severe loss Severe Very severe

R. ear

L. ear

4. Does it stay the same — get better — get worse —?

5. Do you know what caused it?

6. Do you have any side effects ?

7. Are you able to choose whether or not to wear a hearing aid?

8. If you have to wear a hearing aid, what do you feel about it?

II. GENERAL

1. Do you think it a disadvantage to have hearing difficulties?

If so, would you like to say anything about the following SHOW CARD 2

- (a) It causes difficulties in communication
- (b) It is inconvenient
- (c) It is a social disadvantage
- (d) It is an educational disadvantage
- (e) It is a handicap at work

Are there any instances where you've felt particularly handicapped in

any of these fields? Please can you tell me about them...

2. If you feel it is a disadvantage to have hearing difficulties, do you think of yourself as disabled or handicapped in any way?

3. Most people tend to belong or identify with groups. Do you feel you belong most to

- (a) The hearing world
- (b) The 'hard of hearing' world
- (c) The deaf world
- (d) Somewhere in between

Is this a comfortable feeling?

III COMMUNICATION

Although we're using xx now to talk to each other, how do you talk with your friends and family?

- (a) Mainly oral (Lipreading, speech)
- (b) Mainly manual (sign, finger spelling, gestures)
- (c) Both oral and manual
- (d) 'Home-made' sign and gesture

How do you talk with hearing people outside your family and close friends?

(For oral communicators): Have you met people who sign?

What do you think about signing?

IV EDUCATION

1. What kind of school did you go to?

SHOW CARD 3

Ordinary school	Day	—	Residential	—
F.H.U.				
Special School	Day	—	Residential	—
Any combination of these				
Other				

2. What age did you (a) start school — (b) Finish school —?

3. Did you pass any exams or certificates?

If so, at what level:

- RSA
- City and Guilds
- GCE 'O' level
- GCE 'A' level
- HNC/HND
- University/Polytechnic,/College of F.E.
- Other

4. If you went to a special school/PHU what was the kind of communication used?

Was signing allowed?

Do you think the use of xxx form of communication affected your schooling in any way?

Did you find it difficult to go into the outside world later?

Did you get a job straight from school?

Did anyone help you?

Did you have any advice about choosing a job? If so, what?

5. Do you think education for the deaf could be improved? If so in what way?

V. EMPLOYMENT

Can we turn to your work situation:

1. Are you working at the moment? Part time — Full time —

(Or when was your last job if you are not working right now?)

2. What is your job called?

3. What are your actual duties?

4. How long have you been employed there?

V (a) DIFFICULTIES IN ACQUIRING EMPLOYMENT

1. Have you ever been unemployed? (after hearing loss/deafness)

2. If so, what was the reason?

3. Have you had more than one period of unemployment? 2/3 4/5 5+

4. How long has your present/last period of unemployment lasted?

— Weeks — Months

5. Can you tell me roughly how many jobs you've had?

6. (If several changes) can you tell me why you changed?

(a) Has the type of job changed?

(b) Has the level of job changed?

Are there any comments you'd like to make, or instances where you've found it particularly difficult to get work:

7. What kind of job are you looking for?

8. Can you tell me how you got on at the last interview you went for?

9. On the whole have you found job getting easy or difficult?

(If the latter, why do you think this is?)

10. What do you think employers feel about taking on someone with your kind of hearing loss? Would you agree or disagree with these statements:

SHOW CARD 4

Agree

Don't Know

Disagree *

"Employers think it's too much bother".. to employ someone with a hearing loss

"Communication difficulties"

"Accident risk"

"Prefer to employ 'normals'"

"They cause difficulties with colleagues"

"They're slow"

"We're not a charity"

"They're good workers - they don't get distracted"

"They're not trouble-makers"

11. If you are out of work, do you go to the Job Centre/DRO for help?

12. If so, what do you feel about him/her?

13. Do you have a Green Card? Does it help?

14. Do you think the government could do more in helping deaf people get jobs? How? (Prompt)

SHOW CARD 5

Create new jobs

Enforce the quota scheme

Educate employers about deafness

Provide more training and re-training opportunities

Reduce noise levels

V (b) DIFFICULTIES IN ACQUIRING SATISFACTORY EMPLOYMENT

RETENTION

(For those with acquired deafness): When you began to lose/lost your hearing, was there any question of not being able to continue with your old job?

If you are still in the same job, has it been affected at all?

If so, can you tell me how?

(Others): Do you find it difficult to stay in one job? Do you know why?

UNDEREMPLOYMENT

Do you feel you're doing a job which uses the skills, qualifications and experience you have to offer?

*The use of 5-point scales was largely abandoned. Where inserted on the schedule, they were replaced by 3-point scales, or, on occasions, not used

If not, why do you think this is?

NATURE OF JOB

Generally, do you find it satisfactory ——— Not satisfactory ———

Would you like to say anything about the conditions of work

Satisfactory

Unsatisfactory

Hours

Shifts

Travelling

Dirt/noise

Dangerous machinery

Casual/permanent

PROMOTION PROSPECTS

1. Do you think promotion prospects for someone with your kind of hearing loss are

—— the same; —— better; —— worse, than for hearing people

2. Have you ever had difficulty getting promotion yourself?
Can you tell me, if so, what happened?

Why do you think this was?

3. Do you actually want more responsibility than you've got?

4. Do any of the following comments that are sometimes made about hearing impaired people apply to you in any way?

SHOW CARD 6

Reluctance of employers to promote 'the disabled'
Communication difficulties
Difficulties supervising hearing people
Inability to take part in meetings
Inability to use the phone
Preference for 'normals'
Others.

Have there been any instances where you've felt this happening to you?

5. Are there any particular jobs you think you actually couldn't do because of your hearing loss?

RANGE OF EMPLOYMENT

1. Do you think there are enough kinds of jobs available for deaf people?

2. If not, why do you think this is?

3. What would you like to add?

JOB SATISFACTION

Do you like your job very much; quite like it; feel it's just OK; don't like it much; ~~dislike it?~~

What do you like/dislike about your present job?

SHOW CARD 7

Which of the following features of work do you like/dislike and which are important to you

Relationships with colleagues
Relationships with your boss
Pay
Working conditions
The actual job itself
Security
Status/self-esteem
Variety
The opportunity to use your ideas
Others

If you didn't have this hearing loss, what kind of job do you think you would be doing?

Do you want to keep your present job?

V (c) SOCIAL DIFFICULTIES IN ACQUIRING SATISFACTORY EMPLOYMENT

COMMUNICATION

How do you communicate with your workmates and boss at work?

- (a) Using mainly oral means
- (b) Using mainly manual means
- (c) Combined method
- (d) Gesture/writing

Can you understand what they are saying?

Can they understand what you are saying?

How are instructions given to you? /Or how do you convey instructions to others?

Do you think having communication skills are important in getting and keeping satisfactory work?

Do you ever pretend you've heard and understood something when you haven't? If so, what generally happens?

RELATIONSHIPS WITH COLLEAGUES AND EMPLOYERS

1. Do you have a lot of contact —; a fair amount of contact —; only a little contact — with your workmates?
2. Do you think your colleagues are very helpful —; moderately helpful —; not very helpful —; unhelpful —; very unhelpful —; about your hearing difficulties?
3. Would you go to your colleagues for help if there was something you hadn't heard and understood properly?

4. What about your boss?
5. Do you have any close hearing friends from work?
6. Do you enjoy casual office/factory gossip with your colleagues?
7. Do you try to mix with your hearing colleagues, and they with you? Or do you find you tend to 'keep yourself to yourself'?

GENERAL FEELINGS ABOUT SOCIAL RELATIONS AT WORK

Can you tell me if any of the following statements represent how you feel/or have felt. If so, can you remember any things that have happened to you.

SHOW CARD 8

Agree

Don't Know

Disagree

- I feel lonely at work
- I can't talk to anyone
- I join in office/factory gossip
- I have a lot of friends at work
- People tend to avoid me
- People get irritated and impatient with me
- I feel different from others
- I feel confident about my work
- People at work don't understand what hearing loss means
- People are prejudiced about deafness
- I'm frightened I won't be able to hold on to my job
- I feel people treat me like everyone else
- Sometimes I think workmates are saying things about me behind my back
- I feel rejected at work by colleagues
- I worry that my voice sounds odd
- I feel the same as others
- People at work think I can't understand things as well as them

You have xxx type of hearing difficulty. Do you think other people with different types and degrees of severity of hearing loss have some of the same problems at work as you do?

Do you think they feel the same as you?

MY ASSESSMENT (along a 'good/bad' dimension, as would be judged by the average hearing person)

1. Speech intelligibility
2. Lipreading skills ; residual hearing capacity (rating on Competence Scale)
3. Language comprehension
4. Reading ability
5. ~~Overall rating according~~ to "Ease of Communication with.." Scale.

APPENDIX 7: MODIFIED
INTERVIEW SCHEDULE

NAME Male Female

ADDRESS

SOURCE

How old are you?

1. YOUR HEARING LOSS

1. How old were you when you became deaf?

2. Are you deaf in the middle ear? Or right inside?

3. Do you think your deafness is ...

SHOW CARD 1

Mild Moderate Quite Bad/Severe Bad/Severe Very Bad/Severe

R. Ear

L. Ear

(a) With a hearing aid if you wear one

(b) Without a hearing aid

4. Does it stay the same ---; get better ----; get worse ----?

5. Do you know what caused it?

6. Do you have any dizziness, or strange noises in the ear?

7. Do you wear a hearing aid? Do you have to wear one/two?

8. What do you feel about wearing an aid?

GENERAL

1. Do you think it makes extra problems being deaf - on top of/in addition to/just not being able to hear?

SHOW CARD 2

(a) In talking to people?

(b) In making friends?

(c) Daily difficulties?

(d) At school?

(e) At work?

Can you think of any times you have had difficulties?

2. Do you think you are disabled because of your deafness?

3. Who do you like to be with most:

(a) Hearing people

(b) ~~Hard of hearing~~ people

(c) Deaf people

(d) Both

Do you feel uncomfortable with any of these groups?

COMMUNICATION

1. How do you talk to your family and friends

(a) Mainly speech

(b) Mainly sign

(c) Both

(d) Your own signs your family understands

2. How do you talk with hearing people outside your family?

(For oral communicators): Have you met people who sign?

If yes, what do you think about signing?

(For manual communicators) what do you think hearing people feel about seeing you sign?

SCHOOL

1. What school(s) did you go to?

SHOW CARD 3

Ordinary

Day —

Residential —

PHU

Special

Day —

Residential —

Any mixture of these

Other

2. How old were you starting school — Finishing school —

3. Did you pass any exams or certificates?

If so, what?

4. Did you talk or sign (or both) at school?

5. Do you think .. /talking/signing .. made school difficult?

6. Did you get a job straight from school?

7. Did anyone help you? Did you have any advice about choosing a job?

8. If you went to a special school, was it easy/difficult to go outside?

9. Do you think schools for the deaf are good or bad? Can you tell me what you thought of your school(s)?

10. Did you go on to further schooling when you were older (like College? Or learning a trade?)

If so, did you pass exams, certificates?

WORK

1. Are you working now? Part-time — Full-time —

(If not working now, when was your last job?)

- 2. What is your job called?
- 3. What do you do at work?
- 4. How long have you worked there?

(a) DIFFICULTIES IN ACQUIRING EMPLOYMENT

- 1. Have you been unemployed/without a job/on the dole/'signing on'?
- 2. If so, what happened?
- 3. Have you been unemployed /without a job : one time —
2 times —
several times —
- 4. How many weeks/months were you without a job the most recent time?
- 5. How many jobs have you had?
- 6. If you've changed, why?

Do you think it's difficult for you to get a job - can you give me an example?

- 7. Is your present job what you really want to do?
- 8. When you go for interviews, what happens, eg:
 - (a) Do you go alone?
 - (b) How do you talk to the interviewer?
 - (c) Do you need help with application forms?

9. Do you think employers want to give jobs to deaf people ? Do you agree or disagree with any of these statements a boss might make:

SHOW CARD 4

Agree

Don't Know

Disagree

- Employers "can't be bothered"
- "They can't talk with you"
- "Deaf people make accidents"
- "They want hearing people"
- "Deaf make trouble with other workers"
- "Deaf are slow"
- "Deaf are good workers. They don't gossip"
- "They don't make trouble" /join T.U.s

Has anything like this happened to you?

10. Do you have a Green Card?

11. Do you think it helps you get a job?

12. Do you go to the Job Centre/DRO for help finding a job? What do you think of them?

13. Do you think the Government should help more in getting deaf people jobs?

SHOW CARD 5

If so, how? (Prompt)

- (a) Make new jobs
- (b) Make bosses obey the Green Card
- (c) Tell bosses what deafness is (so they understand)
- (d) Make more opportunities to learn new trades

(b) DIFFICULTIES IN GETTING SATISFACTORY WORK

RETENTION

Have you ever been asked to leave jobs because your hearing has become worse?

Have the things you can do in a job been restricted at all?

Do you find it difficult to stay in one job? If so, do you know why?

UNDEREMPLOYMENT

Does your job use all your skills/ability/schooling?

Could you do a better job than the one you're doing now?

NATURE OF JOB

Generally is your present job OK ——— not OK ———

Are you happy with:

- The hours of work
- Any shift work
- Travelling to and from work
- Any dirt or noise?
- Machinery dangers?
- Casual/or can you work there until you are 60/65?

PROMOTION

1. Do you want to be promoted /go up the ladder/ be boss?

2. Have you tried? If so, what happened?

3. Do you think employers want deaf people to be boss?

Do you think the following statements are true or not true?

SHOW CARD 6

- (a) Employers don't want any disabled person to be boss
- (b) They want people with speech to be boss
- (c) They think deaf people might have problems being boss over hearing people
- (d) They think deaf people can't hear at meetings
- (e) They think deaf people can't use the 'phone.

Have any of these things ever been said to you?

4. What jobs do you think you actually cannot do because of your deafness?

RANGE OF EMPLOYMENT

- 1. Are there enough kinds of jobs for deaf people?
- 2. Do you think deaf people could do more jobs than they do?

If so, what stops them?

3. What jobs would you like to add?

JOB SATISFACTION

Do you like your job very much —, is it just OK —, do you dislike it? —

What things do you like/dislike in your job; and which are important to you?

SHOW CARD 7

- (a) Your workmates
- (b) Your boss
- (c) The pay/money
- (d) The work you do
- (e) Security/safety
- (f) Pride in what you do
- (g) Many different things to do
- (h) Other

If you were not deaf, what job do you think you would be doing?

Do you want to keep your present job?

(c) SOCIAL DIFFICULTIES IN ACQUIRING SATISFACTORY EMPLOYMENT

COMMUNICATION

How do you talk to your workmates and boss at work?

- (a) Using mainly speech/lipreading
- (b) Using mainly signs
- (c) Both

Can you understand what they are saying?

Can they understand you?

How does your boss tell you when he wants something done?

Do you think being able to talk to hearing people at work is important?

Do you ever 'lie' a little - say you've heard and understood when you haven't?

If not, do you ask hearing people to say it again?

RELATIONSHIPS WITH COLLEAGUES AND EMPLOYERS

1. Do you mix a lot — ; a fair amount — ; or very little — with your workmates?
2. Do you ask them for help if you can't hear and understand?
3. Are your workmates helpful and understanding about your hearing loss or not?
4. What about your boss?
5. Do you have any close hearing friends from work?
6. Do you like to gossip with hearing workmates?
7. Do you try to mix with your workmates? Do they try and mix with you? Or do you 'keep yourself to yourself' /stay on your own?

GENERAL FEELINGS ABOUT SOCIAL RELATIONS AT WORK

Have you felt any of the following things? Or have any of these things happened to you?

SHOW CARD 8

Yes

No

- I feel lonely at work
- I can't talk to anyone
- I join in office/factory gossip
- I have a lot of friends at work
- People avoid/don't come near me
- People get cross and impatient with me
- I feel different from other people
- I feel confident/can do my job well
- People at work don't understand about deafness
- People have bad ideas about deafness
- I'm frightened I'll lose my job
- I feel equal/the same as everyone else
- Sometimes people say unkind things behind my back

Yes

No

I feel people don't want me there at work
I worry that my voice/speech sounds strange/
funny
People think I can't understand things at
work

MY ASSESSMENT (along a 'good/bad' dimension as would be judged by the
average hearing person)

1. Speech intelligibility
2. Lipreading skills; residual hearing capacity - rating on Competence
Scale
3. Language comprehension
4. Reading ability
5. Overall rating according to "Ease of Communication with" .. Scale

APPENDIX 8 (i): ATTEMPTS AT CLASSIFICATION

THE GALLAUDET HEARING SCALE

1. I can hear loud noises
2. I can usually tell one kind of noise from another
3. I can usually tell the sound of speech from other sounds
4. I can usually hear and understand a few words without seeing the speaker's face and lips
5. I can usually hear and understand most of the things a person says to me without seeing his face and lips.

"The items, in that order, have logical validity, in that a person who answered No to the first item would logically be expected to answer No to all subsequent items ... Conversely, a person who answered Yes to item /5/ would be expected to answer Yes to all the preceding items. Knowing the point on the scale at which the individual reversed his responses (from Yes to No) it should be possible to reconstruct his answers to all other points on the scale"

(From SCHEIN, J., "The Deaf Community: Studies in the Social Psychology of Deafness", 1968)

APPENDIX 8 (ii): QUESTIONS ABOUT YOUR HEARING

(Please tick which column applies to you for each statement)

WITH GREAT
DIFFICULTY
With Aid No Aid

WITH A LITTLE
DIFFICULTY
With Aid No Aid

EASILY
With aid No Aid

SPEECH HEARING AND DISCRIMINATION

1. Can you understand if someone speaks to you in a whisper and you can't see his face?
2. Can you understand a person when you are sitting beside him and can't see his face (when it's reasonably quiet)?
3. Can you carry on a conversation with someone who speaks softly?
4. If you are within 3 or 4 feet of a person who speaks in a normal voice facing you, can you hear and understand what he says?
5. Can you carry on a conversation at home if you are seated across the room from someone who speaks in a normal tone of voice?
6. When you talk with a waiter or shop assistant, can you understand what he/she says, even if there is background noise?
7. Can you understand women when they talk?
8. Can you hear when someone calls to you from another room? (a) a man; (b) a woman?
9. Can you understand when someone speaks to you from another room? (a) a man; (b) a woman?
10. Can you carry on a conversation with one other person when you are in a noisy place, eg. a pub, or works canteen?
11. If you have to ask for directions in the street, can you understand a person's reply?
12. When you are introduced to someone can you understand their name first time off?

WITH GREAT
DIFFICULTY
With Aid No Aid

WITH A LITTLE
DIFFICULTY
With Aid No Aid

EASILY
With Aid No Aid

13. Can you hear and understand OK when you are conversing in a group of people (in fairly quiet surroundings)?
14. Can you carry on everyday conversations with members of your family without difficulty?
15. If you are 6-12 feet away from the loudspeaker of a radio, can you understand what's being said?
16. If you are 6-12 feet away from a TV set, at normal volume, do you understand most of what is being said?
17. Can you carry on a phone conversation (with/Without amplifier) in your home without difficulty?
18. When you are in a church/lecture hall, can you hear what is said when the speaker does not use a microphone: (a) at the front; (b) in the middle; (c) at the back?
19. When you are in a church/lecture hall, can you hear what is said when the speaker does use a microphone: (a) at the front; (b) in the middle; (c) at the back?
20. How many rows from the front of a meeting or theatre do you need to be before you can hear well enough to follow what is going on?

ACUITY FOR NON-SPEECH SOUNDS

1. Can you hear the phone ring when you are in the next room or upstairs?
2. Can you hear the phone ring when you are in the room where it is situated?

	<u>EASILY</u>	<u>WITH A LITTLE</u>	<u>WITH GREAT</u>
	<u>With Aid</u>	<u>With Aid</u>	<u>With Aid</u>
	<u>No Aid</u>	<u>No Aid</u>	<u>No Aid</u>
		<u>DIFFICULTY</u>	<u>DIFFICULTY</u>

3. Can you hear warning signals, eg. car horns, fire engines, ambulance sirens?
4. Can you hear your watch/clock tick?
5. Can you hear your alarm ring (without a flasher)?
6. Can you hear your doorbell ring (without a flasher)?

LOCALISATION

1. When you are at a meeting or at the theatre, would you be able to identify who was talking?
2. Can you hear correctly the direction from which someone is calling you?
3. Can you judge correctly the distance of an approaching car from its sound?

APPENDIX 8 (iii): PURE TONE AIR CONDUCTION TESTING OF RESPONDENTS

I elected to do some form of 'audiometric' testing primarily as a means of classifying respondents fairly broadly into groups for the purposes of comparison. It was felt at this early stage (August 1980) that some 'objective' criterion was a necessary antidote to reliance on subjective perceptions only. I was still influenced not only by the legacy of positivism, but by the status pure tone audiometry seemed to have acquired as the only standardised and internationally recognised means of testing hearing loss. As GREGORY (1964) notes: "Non-clinical assessment of the subject's hearing condition is ... a very hit-and-miss affair .. it is unlikely that two batches of interviewers would ever reach exactly the same conclusions about the same subject".

(That my views underwent a fairly radical volte-face over the research period in no way invalidates the attempts I made. I contend they have served a useful - if not salutary - purpose, as indicated in Chapter 2.)

No audiometric data of any kind had been made available to me for the first three sub-samples of respondents I obtained from Hillingdon Social Services Department, Perivale Employment Rehabilitation Centre, and the Break-through Club. I therefore enlisted the help of a University psychologist, Mr. Harry Moore. The intention was not to use a proper audiometer. I have no car to transport heavy equipment, or to transport respondents to a centre for testing. And at the time, I had no knowledge of the small portable Peters diagnostic audiometer AP32 or AP 32S. (It is doubtful whether I should have been able to negotiate the loan of such an instrument over the interview period). Thus, such practical constraints dictated that whatever equipment was devised should be small and portable. Larger and more sophisticated instrumentation would, of course, have ensured more refined results. The question was one of optimising compromises.

A cassette was made up, consisting of a series of pure tones, delivered at 10 second intervals, at 3 dB levels, 40, 50 and 60, and calibrated over a frequency range of 125 to 12,000 Hz (cf. Test Sheet (a)). Headphones to control for acoustic interference were worn by each respondent, who pressed

a buzzer when a tone was identified. The tester was also equipped with a monitor, but the occurrence of tones could also be checked against the calibrated numbers appearing on the tape recorder.

Two problems soon appeared: The accepted way of determining a threshold of hearing is to average the pure tone loss in the better ear over the frequency range chosen. I quickly found that the 3 dB levels chosen were much too low, in that respondents I was testing could often only identify one or two tones per test. This could have been resolved by taking the 'nil' points on respondents' scores as indicating a loss of more than 120 dB (STORER, 1980). Over 120 dB it is immaterial whether a person hears 10 or 20 dB more, since a deficit of such magnitude indicates a total lack of useful residual hearing. (ie. There would have been little point in finding a more accurate average, because it would, at that figure, have no useful indications for speech). However, this seemed an inadequate solution to the aim of assessing the hearing loss for the range of respondents I had in mind to test.

The second problem was more intractable. Disparate results in testing soon emerged. One respondent, Mr. L.M., was therefore invited in to the University to take a full pure tone audiogram test (air conduction only). The disparities were very marked in that I had been recording responses on the equipment at dB levels which were much better than the threshold at which respondents could, in fact, hear when tested on a proper audiometer. I therefore tested the psychologist on the equipment and obtained an accurate picture of his hearing capacity. The equipment was, therefore, both being administered and interpreted correctly but was deficient in some other, as yet unknown, respect.

The psychologist suggested that incorrect responses were arising for 3 possible reasons: (a) the 10 dB intervals were not discriminating sufficiently for subjects; (b) indications of slight sibilance at the beginning of each pure tone, and a pronounced 'click' at the end of some intervals would suggest that these were being picked up and identified as sensations

or vibrations by respondents rather than tones; (c) the dB levels were too low to cater for the range of hearing loss of my respondents.

It was decided, therefore, to prepare a further tape (cf. Test Sheet (b)), lengthening the signals to prevent attention wandering, taking higher dB levels, and providing finer discrimination points within each level; and improving the purity of tone by eliminating the unintended intrusion of background 'clicks' and sibilance. A fader was used instead of a push button to feed in the signal from the signal generator to achieve this.

It was also decided to restrict the frequency range to 125 - 4,000 Hz. This covers the range of most sensitivities and is the standard range for speech sounds (although some authors suggest the speech reception threshold can be identified well over an attenuated range of 500 - 2,000 Hz (DAVIS and SILVERMAN, 1978). I have retained the use of the wider range, referring to MYKLEBUST's (1964) breakdown of the distribution of speech sounds:

"Approximately 15 per cent of the speech sounds fall between 250 and 500 cycles, 30 per cent between 500 and 1,000 cycles, 40 per cent between 1,000 and 2,000 cycles, and 15 per cent between 2,000 and 4,000 cycles".

It is also a range used and validated by HAGGARD et.al. (1981).

Three levels of intensity at each frequency were devised, averaging 54-57 dB; 61-63 dB; and 66-68 dB; and three further levels within each average dB range were established, the differences between Levels I, II and III representing an increase of 10 dB. Thus a respondent who could not hear at Level I, 1,000 Hz (Low), might hear at Level III, 1,000 Hz (High).

The newly devised equipment was then tested on myself and found to be consistent with the findings of air conduction testing on the University audiometer. I then re-tested Mr. L.M. and the results showed broad compatibility with his audiogram proper. It was possible to re-test only 2 of the original respondents (Mr. F.J. and Mr. S.G.) and the data was found to have corrected for error in both cases.

Further validation of the exercise was inferred from obtaining audiograms for 3 of my original respondents from Hillingdon E.N.T. Clinic (the

only sub-sample for which I obtained audiograms and which, it will be recalled, I had no need to use). Thus validity had been confirmed altogether in 6 cases (including myself).

It is necessary to deal with the very valid criticism of LYSONS (1978): that audiometric measurements are for otologists to administer and interpret, not untrained, unqualified personnel. I am all too conversant with the dangers of lay researchers drawing incorrect inferences from such data. However, to reiterate, the aim was to devise an heuristic instrument which could be fairly readily used to divide my population into broad groups, whilst, at the same time, being sufficiently reliable to give me a rough approximation of respondents' pure tone hearing loss.

The subjective element in my own interpretation of the 'evidence' and the way in which I chose to classify it, make no pretensions to being other than amateur. The data is thus presented in the form of a series of patterned matrices for a sample of respondents, so as to be readily accessible to the layman.

Additionally, rather than trying to embrace a corpus of technical language and concepts with which I was insufficiently conversant, I have based my classification of respondents along a simple 5-point "Competence" Scale, from "Competence Good" (I), to "Competence Very Severely Impaired" (V) (cf. p. 423). It is designed to correspond broadly, as far as severity of impairment is concerned, with the gradations adopted on the "Ease of Communication with" Scale for severity of handicap. (The problems this incurred will be indicated later, and have already been dealt with in Chapter 2.)

It will be readily apparent that whilst the two polarities, Groups I and V caused little problem in classification - either the response was positive over all frequencies at the lowest average dB threshold, or there was nil response at the maximum average dB threshold - those in between presented considerable difficulties.

I have, therefore, endeavoured to establish and group together what

appear to be fairly consistent patterns of response: distinguishing the levels or thresholds at which hearing for pure tone still remains intact, the parts of the speech range still covered, and the symmetry or asymmetry of loss. It is, of course, a moot point whether, for example, asymmetry of loss with preservation in the better ear over the whole speech range is 'better' or 'worse' than symmetrical loss, at perhaps a higher average dB threshold (eg. Level II), or covering only part of the speech range. It simply depends on the situation one is facing and the purpose for which acuity of auditory perception is required. It is similarly difficult to ascertain whether symmetrical hearing at Level III only over, say, two-thirds of the speech range is 'better' or 'worse' than asymmetrical loss above Level II over a comparable part of the speech range.

With these difficulties in mind, I refer the reader to the examples I have given which guided my own steps in trying to devise a coherent means of classification. I have selected for demonstration 3 subjects from each "Competence Group" as representing fairly well-defined examples of a particular pattern (cf. Graphs and accompanying data sheets at the end of this Appendix). The matrices of the remaining 23 respondents I included in the sample were, in some cases, slightly less well defined, but nonetheless relevant to a discussion of the statements I feel able to make about the findings.

Prior to a discussion of these, a few additional qualifications need to be made concerning the limitations of my equipment. Statistically respondents with asymmetric loss of 40 dB or over form a very small proportion of the hearing impaired population. It was therefore fortunate that I came across Miss P.L. in the early stages of testing. For this situation, masking is necessary, for which I was totally unequipped. It consists of "... keeping the unwanted ... ear busy listening to a loud noise entirely different in character from the pure tones we are using for the threshold test" (NAUNTON, 1968).

In addition, bone conduction testing should ideally also have been performed, but I was similarly unequipped to do this. I have been unable to locate the exact degree of distortion - if any - incurred by such an omission.

However, I refer to STORER (1982) who comments that apart from very exceptional circumstances, it is quite sufficient to test for air conduction only, a procedure he adopted in his own well-acclaimed research (1975).

Finally, it was still difficult to assess, in marginal cases, whether respondents were reacting to vibration or sensation rather than to the stimulus of a tone. In the case of Mr. D.S. for example, profoundly prelingually deaf, he responded affirmatively to the lowest average dB threshold across all frequencies. Yet he was unable to hear a bang or thump on the chair when I tried to attract his attention. Both Miss P.L. and Mr. D.S. were omitted from the sample for these reasons.

A further 10 respondents were omitted from the sample for other reasons: the request to terminate the test because of alleged pain and discomfort (Miss V.G. and Miss L.S.); uncertainty of response (Mr. C.S.); an inability to re-do the test situation with the revised equipment (Mr. H.H. and Mr. W.C.); and a combination of fatigue, time constraints and irritability on the part of 5 respondents which precluded testing at every relevant level (Miss H.Q., Mrs. I.Y., Mr. A.E., Mrs. S.B. and Mrs. A.B.)

FINDINGS

These have to be interpreted with some circumspection given the difficulties inherent in juxtaposing two sets of data based on disparate criteria and, therefore, on incompatible levels of discourse. Nevertheless, the initial objective was the same: namely to achieve some measure of respondents' hearing capacity. It is with the above caveat that I present such findings as emerged. It is for future researchers to refine my endeavours.

I refer the reader to Tables 8a and 8b at the end of this section where the discrepancies between my functional assessment of respondents according to an "Ease of Communication with" Scale and ranking according to the results of pure tone testing will be readily apparent.

Marked discrepancies (ie. where ranking differed by two or more groups) were most noticeable in Communication Group I: Mrs. L.L., Mrs. D.H.

and Mr. B.T. are profoundly deaf, yet accomplished lipreaders in a one-to-one situation, as is Mr. C.R. with somewhat more residual hearing to aid him. Miss B.G. is not only profoundly deaf. She is profoundly prelingually deaf, and by all accounts should not be able to function in Communication Group I at all. Yet on my several encounters with her, both at home and at the Club, easy interaction was readily achieved, as it was with the 3 other respondents.

It must be noted, of course, that testing in adulthood may bear little relation to the results of testing during childhood. How far hearing has deteriorated since childhood is an unknown quantity with all respondents in this sample.

Respondents ranked 'audiometrically' in Group II generally reflected a pure tone loss pattern which was asymmetric, or symmetric but preserved either over the lower or higher part of the speech range, or at Level II over the major part of the speech range, allowing fairly free room for compensating devices to be employed in interaction with others. There were fewer marked discrepancies. However, Mr. S.L., and to a lesser extent Miss C.G. were important exceptions, both being prelingually deaf, the latter profoundly so. Again, both respondents communicated fairly easily in the one-to-one situation of an interview.

As one proceeded along the "Ease of Communication with" Scale, there was increasing congruence between my ranking of respondents' communicative competence as deficient, and their Competence rating as Severely or Very Severely Impaired in the testing situation (Mrs. F.S. excepted). In 5:8 Communication Group V cases, assessments on both Scales were exactly congruent. This may reflect the increasing 'efficiency' of pure tone testing when the variables which are so important in determining functional performance are increasingly absent.

However, it is the marked discrepancies (8:38) where ranking between communicative and audiometric competence differs by 2 or more groups, and

to a lesser extent the smaller discrepancies (10:38) where ranking differs by one group, which call into question reliance on traditional methods of assessing hearing loss. As BENDERLY (1980) notes, it is what audiometric measurements fail to tell us which are of significance. What is plain from this small exercise is the failure of pure tone air conduction testing to predict with any degree of success or accuracy how well or how badly an individual will perform in his outside life domains, given ~~x%~~ hearing loss. Yet in many if not most clinics pure tone audiometry is still the only criterion used. Speech discrimination tests, even of the simplest variety, (ie. Phonetically Balanced Word Lists) usually have to be specially asked for. As far as I am aware, Dr. Stephens is one of the few audiologists actively working on the development of more sophisticated testing and questionnaire administration aimed at gauging just such functional capacity (BARHAM and STEPHENS, 1981).

The finding that very nearly half the testing assessments made of respondents would, if judged in isolation, indicate a picture which was worse - and in 8 cases markedly worse - than actual functional performance, has important ramifications: particularly for the role of audiologist as official labeller, and subsequent categorisation processes for educational and occupational placement. (In 15 cases, the rankings corresponded; and in only 5 cases was the pure tone assessment actually better than functional performance, as rated on my "Ease of Communication with" Scale).

This would suggest that severity of loss, even when taken in conjunction with a 'knowledge' from respondents of age of onset of impairment, and mono-/binaurality, is unable to tell us what a person can hear. Most importantly, it fails to identify what a hearing impaired adult is able to do with whatever residual hearing is left to him. A much worse diagnostic and prognostic label is in danger of being applied to him than may be justified by the various compensatory mechanisms a person has at his disposal.

Finally, what is of note is that some respondents ranked 'audiometri-

cally' in Competence Groups I and II were often those who articulated most strongly the sense of being handicapped by their impairment (Miss N.P., Mrs. C.O., Mrs. A.H., and Mr. J.R. being particularly vocal on this score). This is not to infer, however, that respondents in Competence Groups III-V were better 'adjusted' to their lot, as argued by COWEN and BOBROVE (1966). Articulation of their frustration was often situation-specific as I have shown. A more plausible explanation in line with the thrust of the argument of this thesis may lie in the pervasiveness with which stereotypic images concerning 'deafness' tend to be incorporated by respondents, particularly those with acquired deafness. It is a case of confronting their own culturally inherited stereotypes.

In conclusion I consider my efforts at pure tone air conduction testing, whilst failing to serve the purpose for which they were originally intended, have nevertheless added some substance to the findings of previous writers with more extensive experience of the subject than mine (HERBST and THOMAS, 1980; STEPHENS, 1980; THOMAS and RING, 1981): namely the limitations of such a measurement as a predictive tool for assessing functional capacity; and its negative concentration on what a person cannot, rather than can, hear. As STORER (1980) has commented on the latter point: "It is not really what a deaf person hears of pure tones that matters but rather how much use he or she makes of the hearing they have".

More importantly, my findings have suggested a new and more insidious dimension: namely the possible distorting effects clinical labels may have on their own, divorced from other information relating to a subject's functional performance. It is after all clinical information which reaches employers by way of reference or testimonial. Yet the failure of audiologists to relate pure tone ability to hear to functional capacity reflects the very dilemma in which I have found myself trapped: the problem of transcoding, or relating one set of measures based on the inner logic of the scientist to the subjective assessments of his patients. I leave the problem of the possibly distorting effects of reliance on pure tone audiometry alone for future researchers to investigate.

The failure of pure tone testing to accomplish what I had hoped has it-

self been of salutary importance, more than justifying the effort involved. I could not have convinced myself, short of actually carrying out the exercise and endeavouring to juxtapose two sets of data based on fundamentally different levels of discourse, that recourse to both qualitative and quantitative data does not necessarily work. Reliance on one or other method is necessary to avoid straining the data. Recourse to other means of validation of qualitative data, such as respondent verification, is possibly one of the ways out of such a dilemma.

Test Sheet 8 (a)

<u>FREQUENCY</u>		<u>TAPE COUNT</u>	<u>L.H. VOL.</u>	<u>R.H. VOL.</u>	<u>R. EAR</u>	<u>L. EAR</u>
125	40 dB	004-007	1	2		
	50 dB	11-15		3		
	60 dB	20-24		4		
250		27-31	1	2		
		35-40		3		
		45-49		4		
500		53-57	2	2		
		61-65		3		
		69-73		4		
1,000		77-81	2	2		
		85-89		3		
		93-96		4		
2,000		100-105	3	2		
		108-112		3		
		115-119		4		
3,000		123-127	3	2		
		130-133		3		
		137-141		4		
4,000		145-149	4	2		
		154-158		3		
		162-165				
5,000		170-173	4	2		
		177-180		3		
		183-186		4		
6,000		191-194	5	2		
		197-199		3		
		203-206		4		
7,000		209-212	5	2		
		216-219		3		
		221-224		4		
8,000		228-231	6	2		
		234-236		3		
		240-243		4		
9,000		246-249	7	3		
		253-255		4		
		259-262		5		
10,000		265-268	8	4		
		271-274		5		
		276-279		6		
11,000		282-285	9	4		
		288-291		5		
		294-296		6		
12,000		299-302	9	4		
		305-307		5		
		310-313		6		

Test Sheet 8b

Right hand vol: at 2 for 1st session
: at 3 for 2nd session
: at 4 for 3rd session

START AT B = 50

Average dB. threshold

<u>FREQUENCY</u> in Hz	LOW <u>54 - 57</u>	MEDIUM <u>61 - 63</u>	HIGH <u>66 - 68</u>
---------------------------	-----------------------	--------------------------	------------------------

LEVEL

	I
125	II
	III

	I
250	II
	III

	I
500	II
	III

	I
1,000	II
	III

	I
2,000	II
	III

	I
3,000	III
	III

	I
4,000	II
	III

Right Ear - ✓✓

Left Ear - ✓

COMMENTS

PURE TONE AIR CONDUCTION TESTING
COMPETENCE SCALE

1. COMPETENCE GROUP I: COMPETENCE GOOD

Hearing for pure tones at Level I over the whole frequency range (125 Hz to 4,000 Hz) and at lowest dB threshold (average 54-57) with both ears.

2. COMPETENCE GROUP II: COMPETENCE MODERATELY ADEQUATE

For example:

- (i) Asymmetric loss, but hearing in better ear wholly or largely preserved over the speech range, at the lowest dB threshold, or preserved over the whole speech range at Level II;
- (ii) Loss symmetric, but preserved over lower or higher part of the speech range at lowest average dB threshold (Level I);
- (iii) Loss symmetric but preserved at Level II over major part of the speech range;
- (iv) 'Cut off' at higher frequency ranges, at all levels.

3. COMPETENCE GROUP III: COMPETENCE FAIRLY SEVERELY IMPAIRED

For example:

- (i) Asymmetry of loss with hearing at Levels II and III preserved in better ear only, covering speech range either wholly or partially;
- (ii) Symmetry of loss, residual hearing for pure tones covering only Level III over middle spectrum of speech range;
- (iii) 'Cut-off' points at low and/or high frequencies

4. COMPETENCE GROUP IV: COMPETENCE SEVERELY IMPAIRED

For example:

- (i) Hearing at frequency Levels below speech range indicating little or no capacity to pick up or discriminate speech sounds;
- (ii) Hearing only at isolated frequencies and average dB thresholds;
- (iii) Marked 'cut-off' points over 500 Hz where response dropped below average dB threshold levels tested

5. COMPETENCE GROUP V: COMPETENCE VERY SEVERELY IMPAIRED

Nil response to testing situation at any average dB threshold over any frequency

Table 8 (a)

RESPONDENTS CLASSIFIED ACCORDING TO THE COMPETENCE SCALE, FROM PURE TONE
AIR CONDUCTION TESTING RESULTS

COMPETENCE GROUP I

Miss N.P.
Mr. P.E.
Mrs. E.I.
Mr. B.S. Total - 8
Mr. S.W.
Mrs. C.O.
Miss A.S.
Mrs. A.H.

COMPETENCE GROUP II

Mr. L.M.
Mr. N.M.
Mr. B.U.
Mrs. G.L.
Mr. F.J. Total - 9
Mrs. B.C.
Mr. J.R.
Mr. S.G.
Mr. C.P.

COMPETENCE GROUP III

Mr. C.R.
Mrs. F.S. Total - 4
Miss C.G.
Mr. D.O.

COMPETENCE GROUP IV

Mr. S.L.
Miss B.G.
Mr. B.T. Total - 7
Mrs. L.L.
Mrs. D.H.
Mr. M.R.
Miss P.K.

COMPETENCE GROUP V

Mrs. N.F.
Miss A.L.
Miss M.A.
Mr. E.B.
Mr. M.C.
Mr. G.C. Total - 10
Miss G.F.
Miss R.C.
Mrs. S.T.
Mrs. B.L.

Total respondents sampled: 38. 12 respondents were unable to be included

Table 8 (b)

COMPARISON OF RESPONDENTS RANKED ACCORDING TO THE "EASE OF COMMUNICATION WITH" SCALE, AND CLASSIFICATION ALONG THE COMPETENCE SCALE FOR PURE TONE AIR CONDUCTION TESTING

<u>RESPONDENT</u>	<u>"EASE OF COMMUNICATION WITH"</u>	<u>COMPETENCE SCALE PURE TONE TESTING</u>
Mr. L.M.	I	II
Mrs. G.L.	I	II
Mr. C.P.	I	II
Mrs. L.L.	I	IV
Miss B.G.	I	IV
Mr. D.O.	I	III
Mrs. C.O.	I	I
Miss A.S.	I	I
Mr. P.E.	I	I
Mr. S.W.	I	I
Mrs. D.H.	I	IV
Mr. B.S.	I	I
Miss N.P.	I	I
Mrs. A.H.	I	I
Mr. B.U.	I	II
Mrs. B.C.	I	II
Mr. B.T.	I	IV
Mr. C.R.	I	III
<hr/>		
Mr. S.G.	II	II
Mr. N.M.	II	II
Mr. S.L.	II	IV
Mr. J.R.	II	II
Mrs. E.I.	II	I
Miss C.G.	II	III
<hr/>		
Mr. F.J.	III	II
<hr/>		
Mrs. B.L.	IV	V
Mr. E.B.	IV	V
Mrs. S.T.	IV	V
Mr. M.C.	IV	V
Mrs. N.F.	IV	V
<hr/>		
Miss A.L.	V	V
Mrs. F.S.	V	III
Mr. G.C.	V	V
Miss M.A.	V	V
Miss G.F.	V	V
Miss P.K.	V	IV
Mr. M.R.	V	IV
Miss R.C.	V	V

Table 8 (c)
COMPETENCE GROUP I
 dB

Hz	Miss N.P.		Mr. P.E.		Mrs. E. I.													
	Left		Left		Left													
	L	M	H	L	M	H	L	M	H	L	M	H						
125 c.p.s	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
250	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
500	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
1,000	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
2,000	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
3,000	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
4,000	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x

x = affirmative response to pure tone
 - = negative response to pure tone

PURE TONE AIR CONDUCTION TEST (2)

START AT B = 50

Right hand vol: at 2 for 1st session
3 for 2nd session
4 for 3rd session

Av. dB. threshold

<u>FREQUENCY</u> <u>in Hz</u>	<u>Level*</u>	<u>LOW</u>	<u>MEDIUM</u>	<u>HIGH</u>
		<u>54-57</u>	<u>61-63</u>	<u>66-68</u>
125	1	✓✓	✓✓	✓✓
	11			
	111			
250	1	✓✓✓	✓✓✓	✓✓✓
	11			
	111			
500	1	✓✓✓	✓✓✓	✓✓✓
	11			
	111			
1,000	1	✓✓✓	✓✓✓	✓✓✓
	11			
	111			
2,000	1	✓✓✓	✓✓✓	✓✓✓
	11			
	111			
3,000	1	✓✓✓	✓✓✓	✓✓✓
	11			
	111			
4,000	1	✓✓✓	✓✓✓	✓✓✓
	11			
	111			

* The difference between each level represents a 10 db. increase

✓✓ = Right Ear

✓ = Left Ear

COMMENTS

Was told she had got "a marked loss". Found tones in test "all very loud" - she was waiting for higher tones which she thought she possibly wouldn't hear.

Mr. P.E.

PURE TONE AIR CONDUCTION TEST (2)

START AT B = 50

Right hand vol: at 2 for 1st session
3 for 2nd session
4 for 3rd session

Av. dB. threshold

<u>FREQUENCY</u> <u>in Hz</u>	<u>Level*</u>	<u>LOW</u> <u>54-57</u>	<u>MEDIUM</u> <u>61-63</u>	<u>HIGH</u> <u>66-68</u>
125	1	✓✓	✓✓	✓✓
	11			
	111			
250	1	✓✓	✓✓	✓✓
	11			
	111			
500	1	✓✓	✓✓	✓✓
	11			
	111			
1,000	1	✓✓	✓✓	✓✓
	11			
	111			
2,000	1	✓✓	✓✓	✓✓
	11			
	111			
3,000	1	✓✓	✓✓	✓✓
	11			
	111			
4,000	1	✓✓	✓✓	✓✓
	11			
	111			

The difference between each level represents a 10 db. increase

✓✓ = Right Ear
✓ = Left Ear

COMMENTS

Found test "very easy"

Mrs. E.I.

HEARING CONDUCTION TEST (2)

START AT 50

Right hand vol: at '2 for 1st session
3 for 2nd session
4 for 3rd session

Av. dB. threshold

FREQUENCY in Hz	Level*	LOW	MEDIUM	HIGH
		54-57	61-63	66-68
125	I	✓	✓	✓
	II	✓	✓	✓
	III	✓	✓	✓
250	I	✓	✓	✓
	II	✓	✓	✓
	III	✓	✓	✓
500	I	✓	✓	✓
	II	✓	✓	✓
	III	✓	✓	✓
1,000	I	✓	✓	✓
	II	✓	✓	✓
	III	✓	✓	✓
2,000	I	✓	✓	✓
	II	✓	✓	✓
	III	✓	✓	✓
3,000	I	✓	✓	✓
	II	✓	✓	✓
	III	✓	✓	✓
4,000	I	✓	✓	✓
	II	✓	✓	✓
	III	✓	✓	✓

The 10 db. interval between each level represents a 10 db. increase

✓ = Right Ear
✓ = Left Ear

COMMENTS

Found "bottom easier than top". For speech discrimination tests, sometimes "gets confused because the words are so alike"

H_z

dB

H _z	Mr. L.M.*			Mr. N.M.			Mr. B.U.											
	Left			Rt.			Left			Rt.								
	L	M	H	L	M	H	L	M	H	L	M	H						
125 c.p.s	-	-	-	X	X	X	-	-	-	-	-	-	X	X	X	X	X	X
	X	X	X	X	X	X	-	-	-	-	-	X	X	X	X	X	X	X
	X	X	X	X	X	X	-	-	-	X	X	X	X	X	X	X	X	X
250	X	X	X	X	X	X	-	-	-	-	-	-	-	-	-	X	X	X
	X	X	X	X	X	X	X	X	X	X	X	X	-	-	-	X	X	X
	X	X	X	X	X	X	X	X	X	X	X	X	-	-	-	X	X	X
500	X	X	X	X	X	X	-	-	-	-	-	-	-	-	-	X	X	X
	X	X	X	X	X	X	X	X	X	X	X	X	-	-	-	X	X	X
	X	X	X	X	X	X	X	X	X	X	X	X	-	-	-	X	X	X
1,000	-	-	-	X	X	X	-	-	-	-	-	-	-	-	-	X	X	X
	X	X	X	X	X	X	X	X	X	X	X	X	-	-	-	X	X	X
	X	X	X	X	X	X	X	X	X	X	X	X	-	-	-	X	X	X
2,000	-	-	-	X	X	X	-	X	X	X	X	X	-	-	-	X	X	X
	-	X	X	X	X	X	X	X	X	X	X	X	-	-	-	X	X	X
	X	X	X	X	X	X	X	X	X	X	X	X	-	-	-	X	X	X
3,000	-	-	-	X	X	X	X	X	X	X	X	X	-	-	-	X	X	X
	-	-	-	X	X	X	X	X	X	X	X	X	-	-	-	X	X	X
	-	-	-	X	X	X	X	X	X	X	X	X	-	-	-	X	X	X
4,000	-	-	-	X	X	X	X	X	X	X	X	X	-	-	-	-	-	-
	-	-	-	X	X	X	X	X	X	X	X	X	-	-	-	-	-	-
	-	-	-	X	X	X	X	X	X	X	X	X	-	-	-	-	-	-

* At 250 H_z, Level I (Low), the pure tone was preceeded on the tape by a 'click'. Respondents variously heard one or both. I have taken a response to the pure tone as an affirmative response, and omitted any response to the 'click'.

Mr. L.M.

PURE TONE AIR CONDUCTION TEST (2)

START AT B = 50

Right hand vol: at 2 for 1st session
 3 for 2nd session
 4 for 3rd session

Av. dB. threshold

FREQUENCY in Hz	Level*	LOW	MEDIUM	HIGH
		54-57	61-63	66-68
125	1	W-	W-	W-
	11	✓	✓	✓
	111			
250	1	W✓	W✓	W✓
	11	✓	✓	✓
	111			
500	1	W✓	W✓	W✓
	11	✓	✓	✓
	111			
1,000	1	W-	W-	W-
	11	✓	✓	✓
	111			
2,000	1	W-	W-	W-
	11	-	✓	✓
	111	✓	✓	✓
3,000	1	W-	W-	W-
	11	-	-	-
	111	-	-	-
4,000	1	W-	W-	W-
	11	-	-	-
	111	-	-	-

* The difference between each level represents a 10 db. increase

W = Right Ear
✓ = Left Ear

COMMENTS

Never had speech audiometry. "Wears B13 hearing aid. Says "very difficult to hear without it".

PURE-TONE AIR CONDUCTION TEST (2)

START AT B = 50

Right hand vol: at 2 for 1st session
3 for 2nd session
4 for 3rd session

Av. dB. threshold

<u>FREQUENCY</u> <u>in Hz</u>	<u>Level*</u>	<u>LOW</u>	<u>MEDIUM</u>	<u>HIGH</u>
		<u>54-57</u>	<u>61-63</u>	<u>66-68</u>
125	1	W -	W -	W -
	11	W -	W -	W -
	111	-	-	-
250	1	W -	W -	W -
	11	W ✓	W ✓	W ✓
	111	✓	✓	✓
500	1	W -	W -	W -
	11	W ✓	W ✓	W ✓
	111	✓	✓	✓
1,000	1	W -	W -	W -
	11	W ✓	W ✓	W ✓
	111	✓	✓	✓
2,000	1	W -	W ✓	W ✓
	11	✓	✓	✓
	111			
3,000	1	W ✓	W ✓	W ✓
	11			
	111			W ✓
4,000	1	W ✓	W ✓	W ✓
	11			
	111			

* The difference between each level represents a 10 db. increase

W = Right Ear
✓ = Left Ear

COMMENTS

Respondent commented himself on loss at low frequencies.
"Hearing should be fairly normal for higher tones".

PURE TONE AIR CONDUCTION TEST (2)

START AT B = 50

Right hand vol: at 2 for 1st session
3 for 2nd session
4 for 3rd session

Av. dB. threshold

<u>FREQUENCY</u> <u>in Hz</u>	<u>Level*</u>	<u>Av. dB. threshold</u>		
		<u>LOW</u> <u>54-57</u>	<u>MEDIUM</u> <u>61-63</u>	<u>HIGH</u> <u>66-68</u>
125	1	✓✓	✓✓	✓✓
	11			
	111			
250	1	- ✓✓	✓✓ -	✓✓ -
	11	-	-	-
	111	-	-	-
500	1	- ✓✓	- ✓✓	✓✓ -
	11	-	-	-
	111	-	-	-
1,000	1	- ✓✓	- ✓✓	✓✓ -
	11	-	-	-
	111	-	-	-
2,000	1	- ✓✓	- ✓✓	✓✓ -
	11	-	-	-
	111	-	-	-
3,000	1	- ✓✓	- ✓✓	✓✓ -
	11	-	-	-
	111	-	-	-
4,000	1	- =	- =	= -
	11	- =	- =	= -
	111	- =	- =	= -

* The difference between each level represents a 10 db. increase

✓✓ = Right Ear
✓ = Left Ear

COMMENTS

Generally finds women difficult to hear

H_z

dB

	Mr. C.R.						Mrs. F.S.						Miss C.G.								
	Left			Rt.			Left			Rt.			Left			Rt.					
	L	M	H	L	M	H	L	M	H	L	M	H	L	M	H	L	M	H			
125 cps.	x	x	x	x	x	x	-	x	x	-	-	-	-	-	-	-	-	-	-	-	-
	x	x	x	x	x	x	-	x	x	-	-	-	-	-	x	-	x	x	-	x	x
	x	x	x	x	x	x	x	x	x	x	x	x	-	x	x	x	x	x	-	x	x
250	x	x	x	x	x	x	x	x	x	-	-	-	-	-	-	-	-	-	-	-	-
	x	x	x	x	x	x	x	x	x	-	-	-	x	x	x	-	x	x	-	x	x
	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
500	x	x	x	x	x	x	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	x	x	x	x	x	x	x	x	x	-	-	-	-	-	-	x	x	x	x	x	x
	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
1,000	-	-	-	x	x	x	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	x	x	x	x	x	x	-	-	-	-	-	-	x	x	x	x	x	x
	-	-	-	x	x	x	x	x	x	x	x	x	x	x	x	-	-	-	x	x	x
2,000	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	x	x
	-	-	-	-	-	-	x	x	x	-	-	-	-	-	-	-	-	-	x	x	x
	-	-	-	-	-	-	x	x	x	x	x	x	x	x	x	-	-	-	x	x	x
3,000	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	x	x	x	-	-	-	-	-	-	-	-	-	x	x	x
	-	-	-	-	-	-	x	x	x	x	x	x	x	x	x	-	-	-	x	x	x
4,000	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	x	x	x
	-	-	-	-	-	-	x	x	x	x	x	x	-	-	-	-	-	-	x	x	x

PURE TONE AIR CONDUCTION TEST (2)

START AT B = 50

Right hand vol: at '2 for 1st session
3 for 2nd session
4 for 3rd session

Av. dB. threshold

<u>FREQUENCY</u> <u>in Hz</u>		<u>Level*</u>		<u>LOW</u> <u>54-57</u>	<u>MEDIUM</u> <u>61-63</u>	<u>HIGH</u> <u>66-68</u>
125	1	✓	✓	✓	✓	✓
	11	✓	✓	✓	✓	✓
	111	✓	✓	✓	✓	✓
250	1	✓	✓	✓	✓	✓
	11	✓	✓	✓	✓	✓
	111	✓	✓	✓	✓	✓
500	1	✓	✓	✓	✓	✓
	11	✓	✓	✓	✓	✓
	111	✓	✓	✓	✓	✓
1,000	1	-	-	-	-	-
	11	-	-	-	-	-
	111	-	-	-	-	-
2,000	1	-	-	-	-	-
	11	-	-	-	-	-
	111	-	-	-	-	-
3,000	1	-	-	-	-	-
	11	-	-	-	-	-
	111	-	-	-	-	-
4,000	1	-	-	-	-	-
	11	-	-	-	-	-
	111	-	-	-	-	-

* The difference between each level represents a 10 db. increase

✓ = Right Ear
✓ = Left Ear

COMMENTS

PURE TONE AIR CONDUCTION TEST (2)

START AT B = 50

Right hand vol: at 2 for 1st session
3 for 2nd session
4 for 3rd session

Av. dB. threshold

<u>FREQUENCY</u> <u>in Hz</u>	<u>Level*</u>	<u>LOW</u>	<u>MEDIUM</u>	<u>HIGH</u>
		<u>54-57</u>	<u>61-63</u>	<u>66-68</u>
125	1	= -	3 ✓	3 ✓
	11	3 -	3 ✓	3 ✓
	111	3 ✓	3 ✓	3 ✓
250	1	= ✓	3 ✓	3 ✓
	11	3	3	3
	111	3	3	3
500	1	= -	3 -	3 -
	11	= ✓	3 ✓	3 ✓
	111	3	3	3
1,000	1	= -	3 -	3 -
	11	3 ✓	3 ✓	3 ✓
	111	3	3	3
2,000	1	= -	3 -	3 -
	11	3 ✓	3 ✓	3 ✓
	111	3	3	3
3,000	1	3 -	3 -	3 -
	11	3 ✓	3 ✓	3 ✓
	111	3	3	3
4,000	1	3 -	3 -	3 -
	11	3 -	3 -	3 -
	111	3 ✓	3 ✓	3 ✓

The difference between each Level represents a 10 db. increase

W = Right Ear
✓ = Left Ear

COMMENTS

Wears no hearing aid. Tones "painful" from 2,000 Hz onwards

PURE TONE AIR CONDUCTION TEST (2)

START AT B = 50

Right hand vol: at 2 for 1st session
3 for 2nd session
4 for 3rd session

Avg. dB. threshold

<u>FREQUENCY</u> <u>in Hz</u>	<u>Level*</u>	<u>LOW</u> <u>54-57</u>	<u>MEDIUM</u> <u>61-63</u>	<u>HIGH</u> <u>66-68</u>
125	1	= -	= -	= -
	11	= -	✓ -	✓ ✓
	111	✓ -	✓ ✓	✓ ✓
250	1	= -	= -	= -
	11	= ✓	✓ ✓	✓ ✓
	111	✓ ✓	✓ ✓	✓ ✓
500	1	= -	= -	= -
	11	✓ -	✓ -	✓ -
	111	-	-	-
1,000	1	= -	= -	= -
	11	✓ -	✓ -	✓ -
	111	-	-	-
2,000	1	= -	✓ -	✓ -
	11	✓ -	✓ -	✓ -
	111	-	-	-
3,000	1	= -	= -	= -
	11	✓ -	✓ -	✓ -
	111	-	-	-
4,000	1	= -	= -	= -
	11	✓ -	✓ -	✓ -
	111	-	-	-

* The difference between each level represents a 10 db. increase

✓✓ = Right Ear
✓ = Left Ear

COMMENTS

No speech discrimination tests done which she can remember

PURE TONE AIR CONDUCTION TEST (2)

START AT B = 50

Right hand vol: at 2 for 1st session
3 for 2nd session
4 for 3rd session

Av. dB. threshold

FREQUENCY in Hz	Level*	LOW	MEDIUM	HIGH
		<u>54-57</u>	<u>61-63</u>	<u>66-68</u>
125	1	3 -	3 -	3 -
	11	3 -	3 -	3 -
	111	✓✓	✓✓	✓✓
250	1	3 -	3 -	3 -
	11	3 -	3 -	3 -
	111	✓✓	✓✓	✓✓
500	1	3 -	3 -	3 -
	11	3 -	3 -	3 -
	111	✓✓	✓✓	✓✓
1,000	1	3 -	3 -	3 -
	11	3 -	3 -	3 -
	111	3 -	3 -	3 -
2,000	1	3 -	3 -	3 -
	11	3 -	3 -	3 -
	111	3 -	3 -	3 -
3,000	1	3 -	3 -	3 -
	11	3 -	3 -	3 -
	111	3 -	3 -	3 -
4,000	1	3 -	3 -	3 -
	11	3 -	3 -	3 -
	111	3 -	3 -	3 -

The difference between each level represents a 10 db. increase

✓✓ = Right Ear
✓ = Left Ear

COMMENTS

Miss B.G.

PURE TONE AIR CONDUCTION TEST (2)

START AT B = 50

Right hand vol: at 2 for 1st session
3 for 2nd session
4 for 3rd session

Av. dB. threshold

FREQUENCY in Hz	Level*	LOW	MEDIUM	HIGH
		<u>54-57</u>	<u>61-63</u>	<u>66-68</u>
125	I	5 -	5 -	5 -
	II	5 -	5 -	5 -
	III	5 -	5 ✓	5 ✓
250	I	5 -	5 -	5 -
	II	5 -	5 -	5 -
	III	5 -	5 ✓	5 ✓
500	I	5 -	5 -	5 -
	II	5 -	5 -	5 -
	III	5 -	5 ✓	5 ✓
1,000	I	5 -	5 -	5 -
	II	5 -	5 -	5 -
	III	5 ✓	5 ✓	5 ✓
2,000	I	5 -	5 -	5 -
	II	5 -	5 -	5 -
	III	5 -	5 ✓	5 ✓
3,000	I	5 -	5 -	5 -
	II	5 -	5 -	5 -
	III	5 ✓	5 ✓	5 ✓
4,000	I	5 -	5 -	5 -
	II	5 -	5 -	5 -
	III	5 -	5 -	5 -

* The difference between each level represents a 10 db. increase

✓ = Right Ear
✓ = Left Ear

COMMENTS

PURE TONE AIR CONDUCTION TEST (2)

START AT B = 50

Right hand vol: at 2 for 1st session
3 for 2nd session
4 for 3rd session

Av. dB. threshold

FREQUENCY in Hz	Level*	LOW	MEDIUM	HIGH
		<u>54-57</u>	<u>61-63</u>	<u>66-68</u>
125	1	= -	= -	= ✓
	11	W ✓	W ✓	W ✓
	111	W ✓	W ✓	W ✓
250	1	= ✓	= ✓	= ✓
	11	W ✓	W ✓	W ✓
	111	W ✓	W ✓	W ✓
500	1	= -	= -	= ✓
	11	= -	= -	W ✓
	111	W -	W -	W ✓
1,000	1	= -	= -	= -
	11	= -	= -	= -
	111	= -	= -	= -
2,000	1	= -	= -	= -
	11	= -	= -	= -
	111	= -	= -	= -
3,000	1	= -	= -	= -
	11	= -	= -	= -
	111	= -	= -	= -
4,000	1	= -	= -	= -
	11	= -	= -	= -
	111	= -	= -	= -

* The difference between each level represents a 10 db. increase

W = Right Ear

✓ = Left Ear

COMMENTS

PURE TONE AIR CONDUCTION TEST (2)

START AT B = 50

Right hand vol: at 2 for 1st session
3 for 2nd session
4 for 3rd session

Av. dB. threshold

<u>FREQUENCY</u> <u>in Hz</u>	<u>Level*</u>	<u>LOW</u> <u>54-57</u>	<u>MEDIUM</u> <u>61-63</u>	<u>HIGH</u> <u>66-68</u>
125	1	W -	W -	W -
	11	W -	W -	W -
	111	W -	W -	W -
250	1			
	11			
	111	W -	W -	W -
500	1			
	11			
	111	W -	W -	W -
1,000	1			
	11			
	111	W -	W -	W -
2,000	1			
	11			
	111	W -	W -	W -
3,000	1			
	11			
	111	W -	W -	W -
4,000	1			
	11			
	111	W -	W -	W -

* The difference between each level represents a 10 db. increase

W = Right Ear

✓ = Left Ear

COMMENTS

PURE TONE AIR CONDUCTION TEST (2)

START AT B = 50

Right hand vol: at 2 for 1st session
3 for 2nd session
4 for 3rd session

Av. dB. threshold

<u>FREQUENCY</u> <u>in Hz</u>	<u>Level*</u>	<u>LOW</u> <u>54-57</u>	<u>MEDIUM</u> <u>61-63</u>	<u>HIGH</u> <u>66-68</u>
125	1	✓ -	✓ -	✓ -
	11	✓ -	✓ -	✓ -
	111	✓ -	✓ -	✓ -
250	1			
	11			
	111	✓ -	✓ -	✓ -
500	1			
	11			
	111	✓ -	✓ -	✓ -
1,000	1			
	11			
	111	✓ -	✓ -	✓ -
2,000	1			
	11			
	111	✓ -	✓ -	✓ -
3,000	1			
	11			
	111	✓ -	✓ -	✓ -
4,000	1			
	11			
	111	✓ -	✓ -	✓ -

* The difference between each level represents a 10 db. increase

✓✓ = Right Ear
✓ = Left Ear

COMMENTS

Suffers from tinnitus

Miss A.L.

PURE TONE AIR CONDUCTION TEST (2)

START AT B = 50

Right hand vol: at 2 for 1st session
3 for 2nd session
4 for 3rd session

Av. dB. threshold

<u>FREQUENCY</u> in Hz	<u>Level*</u>	<u>LOW</u>	<u>MEDIUM</u>	<u>HIGH</u>
		<u>54-57</u>	<u>61-63</u>	<u>66-68</u>
125	1	W -	W -	W -
	11	W -	W -	W -
	111	W -	W -	W -
250	1			
	11			
	111	W -	W -	W -
500	1			
	11			
	111	W -	W -	W -
1,000	1			
	11			
	111	W -	W -	W -
2,000	1			
	11			
	111	W -	W -	W -
3,000	1			
	11			
	111	W -	W -	W -
4,000	1			
	11			
	111	W -	W -	W -

* The difference between each level represents a 10 db. increase

W = Right Ear

✓ = Left Ear

COMMENTS

APPENDIX 9: "EASE OF COMMUNICATION WITH" SCALE

I. Easy two-way communication which can be ranged over a wide spectrum with little difficulty. Repetition is seldom necessary. [Reliance on Lipreading, amplification, or residual hearing, ensures virtual 'normality' of interaction].

II. Communication is neither easy nor difficult. Some repetition is necessary, and the range of topics able to be covered is somewhat less diverse. [Occasional vocabulary modifications may be necessary. There are sometimes difficulties in sustaining lipreading for more than short periods at a time. Very occasional 'slips' with words may be made].

III. Communication is rather confined and there are considerable gaps when the two-way conversation temporarily breaks down. [Vocabulary needs to be modified and simplified quite often. Frequent repetitions are necessary and lipreading skills are haphazard. Some mispronunciation and slurring of words is apparent, with difficulty over sibilants and fricatives. Syntax may be jumbled. The tonal quality of speech is affected].

IV. Communication is difficult. [Speech is bizarre and distorted - in rhythm, tonality, intensity - although sometimes just intelligible given sufficient time and familiarity. Lipreading skills are poor]. Frequent recourse has to be made to gesture and/or writing, and this delays communication. [Vocabulary has to be continuously modified and simplified. There are many mispronunciations, sentences are truncated, and their syntax is often reversed]. Sentence construction is generally poor, consisting mainly of substantives. [Literacy skills, however, may still be well developed, but obscured by poor verbal articulation].

V. Communication is extremely difficult. There is frequent misunderstanding on both sides. [Questions have to be constantly checked and re-checked]. Question and answer do not often correspond. Recourse has to be made to signing and gesture. [Reading and writing are rarely sufficiently developed to compensate even partially]. Sentence construction is virtually absent, and consists of isolated words, mainly substantives, with a few very common words. [Speech is either minimal, so distorted as to be totally unintelligible, or non-existent, rendering interaction impossible even if lipreading skills are minimally present. Where literacy is retained, conversation is again impossible owing to a total inability to lipread].

This is based on a combination of scales developed by R.D.K. STORER, M. Ed. (1975), and I gratefully acknowledge his permission to use them. I have, however, found the individual scales which he developed - for speech, lipreading and communication generally, too complex for the contingencies met with in interviewing respondents with varying degrees of hearing impairment. I have thus amended the individual Scales as indicated by the notation [. . .] without, I hope, destroying the internal consistency and logic of the original Scales.*

* Subsequent communication with Mr. Storer elicited the following comment: "I have looked very carefully at your scales and believe that they are admirable. In many ways I believe that they will give a better ranking than did mine. On reflection my scales were too cumbersome" (1982)

APPENDIX 9 contd.: EASE OF COMMUNICATION WITH .. " SCALE - RATIONALE FOR

The Scale was devised in response to the following factors:

1. The necessity of classifying respondents in a way which would permit comparisons readily to be drawn;
2. The inadequacies of my attempts at audiometric measurement, coupled with a recognition that severity of pure tone loss, however 'scientifically' measured, is not only a very poor predictor of functional hearing capacity - which I was trying to assess. Thus respondents with the same degree of pure tone loss averaged out over the better ear over the frequencies 125 to 4,000 Hz often functioned quite differently. More importantly, they bore little if any relation to the processes I was trying to investigate.
3. The inability of speech discrimination tests to cater for those whose main modality was sign language;
4. The inadequacies of the Gallaudet Hearing Scale - it being insufficiently refined to cater for subjects with lesser degrees of impairment;
5. The lack of an adequate scale with which to assess functional capacity;
6. Classification in terms of respondents' perceived severity of loss with the use of a hearing aid, where appropriate, was considered as a means of approximating a measure of functional ability. However, as it is indicative of perception based on only one amongst a complex battery of factors, it was considered insufficiently comprehensive on its own and the idea was abandoned.

Thus I devised a simple scale of "Ease of Communication with .." ranking respondents along a scale from I-V according to the ease or difficulty with which interaction and conversation, on a one-to-one basis with subjects, was possible. My assessment was based on the kinds of expectations and presuppositions the 'average' hearing person might have of an encounter which was sustained over a couple of hours or more. Hearing norms were used as refer-

ents as it was hearing norms with which respondents had to contend at work.

In the absence of any other suitable classificatory measure I contend that as an heuristic device it served its purpose well. Its usefulness may be judged primarily by the fact that my ranking produced a coherent set of results: ie., subjects harder to converse with showed correspondingly greater social problems at work.

As the range of impairment I covered was so diverse, classification was much less likely to be distorted than if I had concentrated on a narrow spectrum of the hearing impaired population, where much finer distinctions would have had to be drawn.

A not dissimilar scale was successfully used by CONRAD (1979) in attempting to assess how people unfamiliar with deaf speech rated its intelligibility. The Scale he used was:

- (i) Wholly intelligible
- (ii) Fairly easy to understand
- (iii) About half understood
- (iv) Very hard to understand
- (v) Effectively unintelligible

(He found an absolute correlation with severity of hearing loss).

Additionally, what can be said in favour of the validity of the Scale relates to the circumstances under which the interviews were conducted. On average, interviews lasted between $2\frac{1}{2}$ and 3 hours. This was more than sufficient time for an adequate and consistent evaluation to be made. Often sessions lasted whole days (and a weekend in one case), and in many cases, more than one session was spent with respondents.

Every effort was made to ensure that the physical setting was, as far as possible, to the respondent's advantage. I sat squarely in the light; avoided wearing striped or brightly coloured clothing; altered the pitch and speed of my voice at the request of respondents; and sat, where necessary, turning towards a respondent's better ear. This is indeed atypical of nor-

mal social encounters. But it ensured not only was I able to obtain a picture of a respondent functioning in optimal conditions: it also placed me in an optimal position to evaluate as accurately and consistently as possible. Thus my ranking errs in favour of the optimistic, but this is counterbalanced to a certain extent, by other factors which might be argued to detract from its usefulness.

As far as consistency of ranking over time is concerned, it is quite unrealistic to give the exercise a degree of precision which it does not warrant. However, there was simply no benefit to be gained in cheating. Averaging out my rankings chronologically (cf. Table 9 (b) and Graph) the proportions will be seen to have remained fairly constant, up until the time of my policy change, and there are no significant anomalies which cannot be accounted for.

A different person doing the same exercise would not, I contend, have made radically different rankings. At most, I suggest, there would have been an overall shift either upwards or downwards rather than individual variations. The relativity of assessment is not at issue here. Moreover, to have had an observer observing my observations would have been both impractical and intrusive, and in any event suffers from its own problems of infinite regress. Finally, a tape recorder with which to check my rankings with those of an independent observer retrospectively was obviously out of the question with respondents in Groups IV and V without speech.

Finally, despite the limitations inherent in respondents' perceptions of the severity of their loss with a hearing aid, where appropriate, such perceptions correlate fairly well with my own rankings (cf. Table 9 (a)).

However, it would be idle to pretend that the Scale was innocent of defects. It was impossible to control for all the extraneous variables which arose: such as my initial lack of familiarity with the hearing impaired and what a 'deaf voice' sounded like. Increasing familiarity, and the corresponding ease with which I found classification could be made may well have

introduced some marginal discrepancies (although with usage, any ranking process becomes easier). The initial pressure to increase the ranking because of my wish to identify respondents with low functional ability was, however, a factor I recognised and resisted to the best of my ability. Other factors, such as variations in background noise; the minor distortions which could have arisen with either respondent or interviewer having a cold or being over-tired; and the variable length of time I spent with respondents, could not be controlled for.

Overall, I contend that the advantages of such a scale far outweighed any obvious disadvantages, and that in the final analysis errors simply tended to cancel out.

The way the Scale was used in practice was as follows: The relatively large number of respondents I ranked in Communication Group I is a function of two factors: the mild degree of impairment and handicap of some respondents (cf. my audiometric measurements of subjects in Competence Group I); and, most importantly, the success with which smoothness of interaction was achieved, despite the fact that this group included some severely deaf respondents. It reflects the positive use which can be made of little or no residual hearing, by means of lipreading, amplification, speech training, personality, and other factors.

In the cases of Miss B.G., Mr. B.U., Miss N.P., Mr. C.R. and Miss P.L., onset of hearing loss occurred on, or very soon after, birth; and in the cases of Mr. C.P., Mrs. I.Y. and Miss A.S., early enough - at the ages of 7/8, 5 and 6½ respectively - to purportedly cause problems in the acquisition of language, and to disrupt ease of interaction. Whilst I would not wish to deny the well-documented effects on speech and language development of the early onset of profound hearing loss, there were sufficient borderline cases here to at least call into question the traditional dichotomy between the pre- and postlingually deafened.

Classification into Groups II and III reflected increasing difficulty

on the part of respondents to master or sustain the art of lipreading, to control the intelligibility of their speech (volume, intonation, rhythm) and ensure that its content was not marred by the loss of sibilants and fricatives, 'jumbled' vocabulary, and errors in syntax. Nevertheless, again it should be noted that in Group II, Miss G.G. is profoundly prelingually deaf, Mr. S.L. partially prelingually deaf, Mrs. E.I. was deafened prior to commencing schooling, and Mr. W.C. said he had been deaf "since childhood".

In Group III, Miss L.S. and Mr. F.J. were also deafened at, or soon after birth, but have been trained in and retained some oral competence; whilst Mr. H.H., similarly partially deafened at birth, straddles both oral and manual worlds.

In Group IV I classified those respondents whose expressive skills were extremely limited, if not verging on the unintelligible (Mrs. S.T.), with haphazard or minimal lipreading skills rendering interaction thoroughly problematic yet whose language development and literacy were far from impaired (Mr. E.B. and Mrs. N.F. - prelingual impairment notwithstanding).

Following my policy change in May 1981 to include signing deaf respondents in my sample, I decided to rank all signing only respondents in Group V. As the average hearing person does not sign, expectations of an encounter are not geared to conversing in an unknown visual modality. Fluency in sign within the framework of this thesis, was not regarded as 'relevant' for the purposes of interaction at work. (This is not for one moment to deny its very crucial relevance to its users socially within their own circle). As stressed, the normative reference point was taken to be that of a hearing world which had to be confronted.

It is probably far from satisfactory to classify those signing deaf with no speech but who were literate, or partially literate, along with those orally deaf respondents with no vehicle of communication than gesture and home-made sign, and who were functionally illiterate. However, as I am con-

cerned with social interaction in a hearing world, and the consequences of breached encounters, writing 'talk' is guaranteed to kill any spontaneity of dialogue.

Thus, also ranked in Group V were those orally literate deaf, generally with acquired deafness, whose speech was so grossly distorted, and whose lip-reading skills were minimal, as to thoroughly disrupt interaction (Miss G.F. and Miss A.L.). Although the ability to read and write often facilitated an otherwise impossible interview it hardly facilitated dialogue.

My concern is primarily with the way hearing others evaluate verbal performance. As such, I contend that such a scale as I have devised served this purpose very adequately.

Table 9 (a): CONSISTENCY OF USAGE CHECKS

RESPONDENTS' PERCEPTIONS OF THE SEVERITY OF THEIR HEARING LOSS WITH THE USE OF A HEARING AID, WHERE APPROPRIATE, MATCHED WITH THE AUTHOR'S RANKING ALONG THE "EASE OF COMMUNICATION WITH .." SCALE

<u>MILD</u>	<u>MODERATE</u>	<u>QUITE SEVERE</u>	<u>SEVERE</u>	<u>V. SEVERE</u>
Miss A.S. (I)	Miss B.G. (I)	Mr. L.M. (I)*	Mrs. L.L. (I)*	Mrs. S.T. (IV)
Mrs. LY (I)	Mr. D.O. (I)	Mr. A.E. (I)*	Mr. S.L. (II)*	Mr. M.C. (IV)
Miss V.G. (I)	Mrs. C.O. (I)	Mr. S.G. (II)	Mrs. B.L. (IV)	Mr. C.S. (V)
Mrs. G.L. (I)	Mr. C.R. (I)	Mr. W.C. (II)	Mr. E.B. (IV)	Miss A.L. (V)
Mr. C.P. (I)	Mrs. D.H. (I)	Miss L.S. (III)	Mrs. N.F. (V)	Miss G.F. (V)
Mrs. S.B. (I)	Mr. B.S. (I)	Mrs. F.S. (V)*	Miss H.Q. (V)	Miss P.K. (V)
Miss P.L. (I)	Mr. B.U. (I)	Miss M.A. (V)*		Miss R.C. (V)
Mr. P.E. (I)	Mr. B.T. (I)	Mr. M.R. (V)*		Mr. D.S. (V)
Mr. S.W. (I)	Mr. N.M. (II)			
Miss N.P. (I)	Mr. J.R. (II)			
Mrs. A.B. (I)	Mrs. E.I. (II)			
Mrs. A.H. (I)	Miss C.G. (II)			
Mrs. B.C. (I)	Mr. F.J. (III)			
	Mr. H.H. (III)			
	Mr. G.C. (V)*			

I have used this measure as one fairly crude check on the validity of my own subjective assessments. Perfect congruence could not be expected. The use/non-use of a hearing aid is only one of the many variables affecting self-assessment.* Nevertheless, it is one of the more important variables. As such assessment differed quite markedly from self-assessment of loss without the use of hearing aid(s) (cf. Table 2 (a), Appendix 2), I suggest it provides a useful guide to a measure of subjective feelings of functional handicap.

Any discrepancies of one ranked Group were ignored. There were 8 cases, (marked by an asterisk) where discrepancies occurred involving differences in ranking and self-assessment of two or more Groups. These can be explained as follows:

1. All signing respondents with minimal or no speech were classified, as explained, in Group V: hence Mr. G.C., Miss M.A. and Mrs. F.S.
2. The residual hearing of Mrs. L.L. and Mr. S.L. was perceived to render a hearing aid virtually useless. Yet Mrs. L.L. was a lipreading tutor and her skills were excellent; Mr. S.L.'s skills were only slightly more difficult to sustain over time.

* For future reference, a more fruitful means of ensuring respondents had adequately appreciated the thrust of the question would have been to ask "How handicapped in carrying out everyday activities do you feel by your deafness?"

3. Both Mr. A.E. and Mr. L.M. underrated the extent to which they were able to achieve near normal comprehension and smooth interaction during the interview situation. Both were fluent lipreaders.

4. It was evidently impossible for Mr. M.R. to grasp the significance of the gradations presented to him. The inclusion of him in the "Quite Severe" group reflected something of a compromise reached between Mr. M.R., his mother, and my understanding of their 'negotiations'.

It will be seen that a broad correspondence between my own ranking according to "Ease of Communication" and respondents' perceptions of the severity of their hearing loss with the use of an aid or aids where appropriate did, nonetheless, emerge, despite my reservations. Subjective assessments of severity of loss (aided, where appropriate) did appear to provide one quite useful index of functional performance, even on the basis of this one criterion.

Table 9 (b)

In order to assess consistency of ranking over a period of time other, necessarily crude, checks consisted of ordering the respondents I interviewed chronologically, then aggregating and averaging their scores according to points I-V along the "Ease of Communication with .." Scale in groups of 5. It will be seen that the proportions are reasonably constant, other than variations which I would have anticipated on independent grounds following the inclusion of orally deaf subjects with minimal lipreading skills, the inclusion of partially prelingually deaf subjects with restricted speech skills, and my policy change of May 1981 to interview much 'deaf' subjects than hitherto. I then performed a similar exercise dividing respondents chronologically and by sex, and the results are again suggestive of consistency of evaluation. The average communication score pre-policy change was 2.0 for women and 1.88 for men. Finally, plotted graphically, the picture is one of consistency of observation over time, any variations being explicable on independent grounds.

CHRONOLOGICAL INTERVIEWING OF ALL RESPONDENTS
AVERAGE "COMMUNICATION" SCORES

	Miss B.G.	9.80	I	
(a)	Mr. W.C.	17.9.80	II	
	Mr. H.H.	20.9.80	III	2 - included 1 partially prelingually deaf subject attached to the deaf community from schooldays
	Mr. S.G.	24.9.80	II	
	Mr. L.M.	26.9.80	I	
	Miss L.S.	1.10.80	III	
	Miss A.L.	15.10.80	V	
(b)	Mrs. I.Y.	16.10.80	I	15 - including 1 orally deaf subject with no lipreading skills & 1 signing deaf subject; plus 1 prelingually deaf subject forced to learn speech
	Mrs. F.S.	23.10.80	V	
	Mr. C.P.	24.10.80	I	
	Mrs. L.L.	5.11.80	I	
	Mr. N.M.	11.11.80	II	8 - includes 1 partially prelingually deaf subject opting to learn speech
(c)	Miss P.L.	15.11.80	I	
	Mr. F.J.	18.11.80	III	
	Mrs. C.O.	20.11.80	I	

Groups (a), (b) and (c) included respondents from Hillingdon Social Services Department - an interesting and varied sample, - two contacts from lipreading classes and 4 contacts from the Breakthrough Club.

	Mr. E.B.	3.12.80	IV	
	Miss V.G.	7.12.80	I	
(d)	Mrs. S.B.	12.12.80	I	<u>12</u> - included 1 orally deaf subject with very poor L.R. skills, and 1 functionally illiterate prelingually orally deaf subject
	Mrs. G.L.	13.12.80	I	
	Mr. C.S.	18.12.80	V	
	Mr. D.O.	20.12.80	I	
(e)	Mrs. D.H.	6.1.81	I	<u>6</u>
	Mr. A.E.	16.1.81	I	
	Mr. C.R.	19.1.81	I	
	Mr. J.R.	22.1.81.	II	
	Mr. S.W.	23.1.81	I	
(f)	Mr. P.E.	28.1.81	I	<u>7</u>
	Miss A.S.	4.2.81	I	
	Miss E.I.	31.1.81	II	
	Mr. S.L.	5.2.81	II	
	Miss N.P.	11.2.81	I	
(g)	Mr. B.S.	18.2.81	I	<u>8</u>
	Mr. B.U.	20.2.81	I	
	Mrs. B.C.	26.2.81	I	
	Mrs. B.L.	4.3.81	IV	

Groups (d), (e), (f) and (g) included the sub-sample from the E.N.T. Clinic Grays Inn Road, many of whom were only peripherally impaired, interspersed with Breakthrough Club contacts, and E.R.C. respondents

(h)	Mrs. A.B.	12.3.81	I	<u>13</u> - includes 1 subject joining the deaf community in adolescence, but with minimal speech, and 1 orally deaf, functionally illiterate respondent
	Mrs. S.T.	19.3.81	IV	
	Mrs. A.H.	17.4.81	I	
	Miss C.G.	7.5.81	II	
	Miss P.K.	15.5.81	V	

At this juncture, I made a policy change in order to try and interview 'deaf' subjects, ie. those profoundly prelingually orally deaf, and signing respondents.

	Miss G.F.	17.5.81	V	<u>20</u>
	Mrs. N.F.	23.5.81	IV	
	Mr. B.T.	27.5.81	I *	
	Miss H.Q.	16.7.81	V	
	Mr. G.C.	18.7.81	V	
	Mr. M.C.	13.8.81	IV	<u>24</u>
	Miss M.A.	Sept. '81	V	
	Mr. D.S.	6.11.81	V	
	Mr. M.R.	12.12.81	V	
	Miss R.C.	Dec. '81	V	

* I had been with Mr. B.T. at sign language classes for several weeks, during which time he had not uttered a single word. I assumed, therefore, that he would be a suitable respondent to recruit. He was, however, perfectly articulate and adept at lipreading.

WOMEN RESPONDENTS INTERVIEWED CHRONOLOGICALLY

Miss B.G.	9.80	I	
Miss L.S.	1.10.80	III	
Miss A.L.	15.10.80	V	<u>15</u>
Mrs. I.Y.	16.10.80	I	
Mrs. F.S.	25.10.80	V	
Mrs. L.L.	5.11.80	I	
Miss P.L.	15.11.80	I	
Mrs. C.O.	20.11.80	I	5
Miss V.G.	7.12.80	I	
Mrs. S.B.	12.12.80	I	
Mrs. G.L.	13.12.80	I	
Mrs. D.H.	6.1.81	I	<u>6</u>
Mrs. E.I.	31.1.81	II	
Miss A.S.	4.2.81	I	
Miss N.P.	11.2.81	I	
Mrs. B.C.	26.2.81	I	
Mrs. B.L.	4.3.81	IV	
Mrs. A.B.	12.3.81	I	<u>11</u>
Mrs. S.T.	19.3.81	IV	
Mrs. A.H.	17.4.81	I	
Miss C.G.	7.5.81	II	
Miss P.K.	14.5.81	V	7

Policy Change

Miss G.F.	17.5.81	V	
Mrs. N.F.	23.5.81	IV	
Miss H.Q.	16.7.81	V	<u>24</u>
Miss M.A.	Sept. '81	V	
Miss R.C.	Dec. '81	V	

(The average score for the pre-policy change group is 2.0)

MALE RESPONDENTS INTERVIEWED CHRONOLOGICALLY

Mr. W.C.	17.9.80	II	
Mr. H.H.	20.9.80	III	
Mr. S.G.	24.9.80	II	2
Mr. L.M.	26.9.80	I	
Mr. C.P.	24.10.80	I	
Mr. N.M.	11.11.80	II	
Mr. F.J.	18.11.80	III	
Mr. E.B.	3.12.80	IV	<u>15</u>
Mr. C.S.	18.12.80	V	
Mr. D.O.	20.12.80	I	
Mr. A.E.	16.1.81	I	
Mr. C.R.	19.1.81	I	
Mr. J.R.	22.1.81	II	<u>6</u>
Mr. S.W.	23.1.81	I	
Mr. P.E.	28.1.81	I	

Mr. S.L.	5.2.81	II	
Mr. B.S.	18.2.81	I	<u>4</u>
Mr. B.U.	20.2.81	I	

Policy change

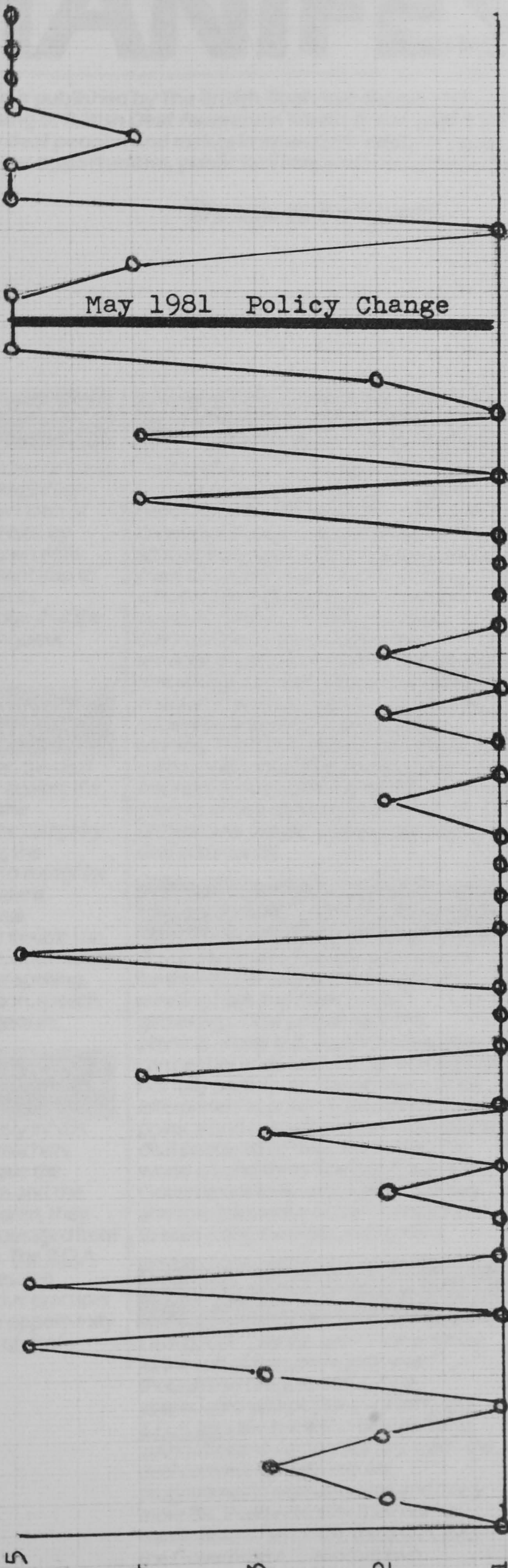
Mr. B.T.	27.5.81	I	
Mr. G.C.	18.7.81	V	
Mr. M.C.	13.8.81	IV	<u>20</u>
Mr. D.S.	6.11.81	V	
Mr. M.R.	12.12.81	V	

(The average score for the pre-policy change group is 1.88)

The difference of .12 can probably be explained by the greater number of signing female respondents (Mrs. S.T., Mrs. F.S.), adventitiously deafened respondents (Miss A.L.) and profoundly prelingually orally deaf respondents (Miss P.K.) interviewed pre-policy change; as opposed to the smaller number of male respondents in these categories: one profoundly prelingually orally deaf subject (Mr. C.S.), one post-lingually deafened respondent with minimal lipreading skills (Mr. E.B.), and Mr. H.H. whose first language was sign, but who was sufficiently orally competent not to be classified as a Group V respondent.

RANKING OF RESPONDENTS
OVER INTERVIEW PERIOD, SEPTEMBER 1980 to DECEMBER 1981*

"EASE OF COMMUNICATION WITH" ... SCALE



Sept. 1980 ← Oct. → Nov. → Dec. → Dec. / Jan. / Feb. 1981 ← Feb. / March ----- May - December 1981

D A T E

*Rankings were not altered at corroboration interview

MANIFESTO

This Manifesto is published by The British Deaf Association on 4 October, 1982. The Manifesto marks the opening of British Deaf Awareness Week; draws public attention to the discrimination suffered by deaf people; and makes known their need for equal access to education and employment opportunities, public facilities and the nation's communications services.

We ask to be heard.

Recognise British Sign Language (BSL)

At least 50,000 people, born deaf or made deaf in early childhood, use British Sign language – BSL – as their main form of communication. BSL is recognised by linguists as a language in its own right. The B.D.A. asks the Government also to recognise BSL, to reflect this in its legislation, and to acknowledge that the British deaf community is a linguistic minority of British people.

Give Deaf Children Access to Total Communication

For a hundred years and more, the deaf community has campaigned against the banning of sign language in the education of deaf children. The campaign continues and the B.D.A. asks the education authorities finally to recognise Total Communication and make it available in the classroom. Total Communication involves the flexible use, from the earliest possible age, of all means of communication: BSL, finger-spelling, lip-reading, sound amplification, speech, reading, writing, mime and gesture.

Let Deaf Adults Teach Deaf Children

Restrictive regulations seriously inhibit deaf people from becoming teachers. Though many deaf people have the necessary entry qualifications and the potential ability to teach children, they are all too often actively discouraged from applying for teacher training. The B.D.A. asks the education authorities and colleges to end these restrictive practices and so give deaf children the opportunity to benefit from the presence of deaf adults in the classroom.

Stop The Closure of Schools for Deaf Children

Deaf children require special educational facilities to meet their special language needs. Yet the 1981 Education Act has encouraged local authorities to close the schools that provide these facilities and to place some deaf children into ordinary schools. The B.D.A. asks the education authorities to keep schools for deaf children open and to expand their services. In particular, the B.D.A. proposes that schools for deaf children should be enabled to provide even better academic education and social and vocational training. The B.D.A. also proposes that such schools should be developed as resource centres, offering facilities for parents of deaf children and for professional people working with the deaf community.

Make BSL Interpreters Available at Public Gatherings

Physically disabled people have fought for the right of easy access to theatres, meeting halls and other public gatherings. Deaf people have this physical access but, unable to hear, they can neither understand what is being said nor fully participate. The presence of BSL Interpreters at public, educational, social, political and cultural events would enable deaf people to be more involved in the world around them. The B.D.A. asks the Government to finance further training and to implement a national programme to train many more BSL interpreters.

Make Television Accessible to Deaf People

Deaf people pay the same TV licence fee as the rest of the community, even though few programmes can be appreciated without sound. Firstly, the B.D.A. asks the television broadcasting authorities and companies to provide the deaf community with regular programmes in sign language and many more BSL interpreters for their normal transmissions. Secondly, the B.D.A. asks the Government to allocate two Cablevision channels for use by the deaf community.

Improve Employment Opportunities for Deaf People

Most deaf people at work are placed in jobs below their capacity and potential, and they are often denied opportunities for training and promotion. Whilst recognising that deaf and hearing people alike are affected by present-day unemployment, the B.D.A. asks the Government, trade unions and employers to work together to improve employment opportunities for deaf people and to end the discrimination that bars their promotion.

Give Deaf People Access to the Telephone

Hearing people can take the telephone for granted. Hard-of-hearing people can have amplifiers and other relatively cheap equipment fitted to their phones. But profoundly deaf people have to rely on the recently developed Deaf Communicating Terminal (DCT), a visual keyboard telephone linked to the national telephone network. Because the DCT costs £400 and because the typed messages take more time and lead to higher charges than ordinary calls, very few deaf people can now afford to buy or use one. The B.D.A. asks British Telecom to reduce its charges so that deaf people can have the same access as hearing people to the national telephone service.

4 October 1982.



The British Deaf Association

38, Victoria Place, Carlisle CA1 1HU.

APPENDIX 11: BIBLIOGRAPHY

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